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St Cloud Hospital

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SAINT CLOUD HOSPITAL

JULY 1, 1976 — JUNE 30, 1977

ANNUAL REPORT FOR 1977

SAINT CLOUD HOSPITAL

1406 Sixth Avenue North
St. Cloud, Minnesota 56301

A General Hospital

Sponsored by the Sisters of St. Benedict
St. Joseph, Minnesota

and

The Diocese of St. Cloud

Independently Incorporated in 1962 as a Non-Profit Institution

Licensed by the State of Minnesota

Fully accredited by the Joint Commission on Accreditation of Hospitals

Nationally approved for training nurses, medical technologists,
radiologic technologists and nurse anesthetists

Member of the American Hospital Association

American Dental Association

Catholic Hospital Association

Pope John XXIII Medical-Moral Research
and Education Center

Minnesota Hospital Association

Minnesota Conference of Catholic Health Facilities

Minnesota Hospital Service Association

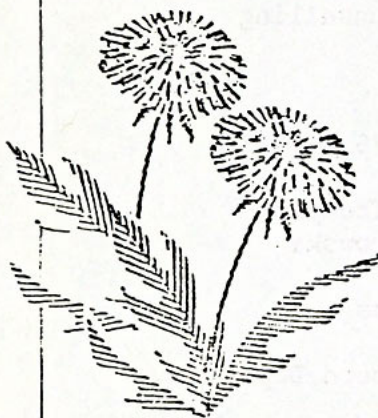
Minnesota Association for Private Vocational Schools

Central Minnesota Area Health Education Consortium

St. Cloud Chamber of Commerce

North American Association of Alcoholism Programs

International Association of Rehabilitation Facilities



AFFILIATED WITH

The College of St. Benedict programs in baccalaureate nursing, medical technology, personnel work, mental health associates, social work and for interim students

St. Cloud State University programs in communications media, medical technology, alcohol and chemical addiction, social service and rehabilitation, speech pathology, systems design and personnel

St. John's University programs for Divinity students, alcohol and chemical addiction and for interim students

St. Cloud Area Vocational-Technical Institute programs for licensed practical nurses, emergency medical technicians and operating room technicians

University of North Dakota and Tufts University for internships in occupational therapy

North Dakota State School of Science for internships for occupational therapists and certified occupational therapy assistants

St. Scholastica College for internships in physical therapy

University of Minnesota for internships in occupational therapy, pharmacy extern program, and for Phase D medical students

The College of St. Catherine for internships in occupational therapy

St. Louis University for administrative residency

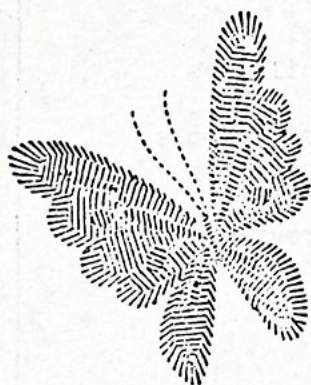
Alexandria Area Vocational-Technical Institute for training dietetic assistants

Central Minnesota Area Health Education Consortium for dietetic traineeships

Anoka Area Vocational-Technical Institute for training medical secretaries

Bethel Theological Seminary program in pastoral care

Willmar State Hospital for training in chemical dependency counselling



INTRAHOSPITAL REPORT FOR 1976 - 1977

- . . Cover design by Mark Thompson
- . . Lettering by Linda Surowski
- . . Typing by Karen Shinn
- . . Printing by Don Martins

Editor and Publisher: Medical Record Department



SERVING THE SICK

WITH

A

STANDARD

OF

PATIENT CARE

BASED UPON

ADVANCED TECHNIQUES

OF

DIAGNOSIS

AND

TREATMENT

AND

THE CONTINUING

DEVELOPMENT

OF

PROFESSIONAL EVALUATION

OF

THE QUALITY

OF

PATIENT CARE

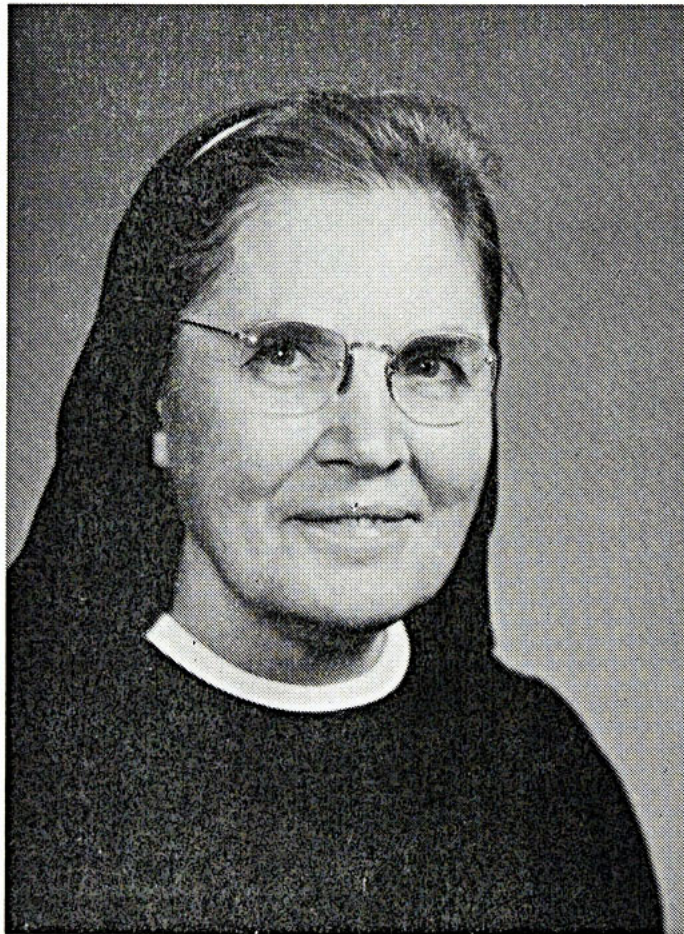
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TO

SISTER HENRITA OSENDORF, O.S.B.



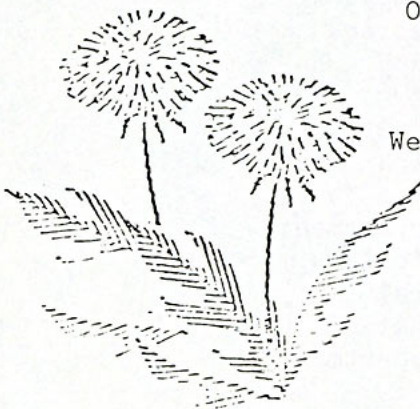
PRESIDENT OF THE BOARD OF TRUSTEES

OF ST. CLOUD HOSPITAL

1961 to 1977

We Humbly and Gratefully

Dedicate This Report

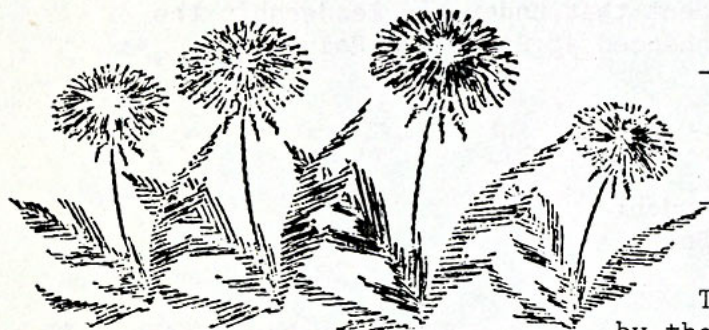


BOARD OF TRUSTEES

TRUSTEES IN 1976 - 1977

Sister Henrita Osendorf
Mr. Gene Bakke
Dr. Paul Moran
Father Robert Harren
Mr. Cy Kuefler

Sister Giovanni Bieniek
Mr. Bernard Gruenes
Sister Herena Mueller
Dr. Dwight Jaeger
Sister Miriam Ardolf
Sister Rita Budig
Mr. Edward Stockinger
Dr. Robert Wick
Sister Paul Revier
Dr. Severin Koop



The year 1976-1977, which launched St. Cloud Hospital into the last decade of its first century of service in the health care field, was one of intensifying our commitment to rendering Christian witness as a hospital community. The Board's activities can be summed up as an ongoing effort to assure the local community high quality patient care in a setting of genuine Christian and human concern. As a Catholic institution, St. Cloud Hospital is an instrument of the Church's healing ministry, through which God's outreach to the world becomes a living experience in human life.

A brief listing of the major considerations of the Board indicates the range of its efforts to maintain and strengthen this ministry:

- Discussing and finalizing decisions pertaining to St. Benedict's Center;
- Effecting a more closely knit hospital community by granting Board membership to the Chief of Staff and the Associate Administrator, ex officio;
- Ongoing concern for the evaluation of the technical and ethical quality of patient care;
- The annual Board retreat and its emphasis on Christian values and ethics;
- Approval of statement on the corporate expression of values of St. Cloud Hospital;
- Communication with State and Federal legislators on areas of concern regarding health care;
- Efforts to preserve and strengthen the Catholic health care apostolate.

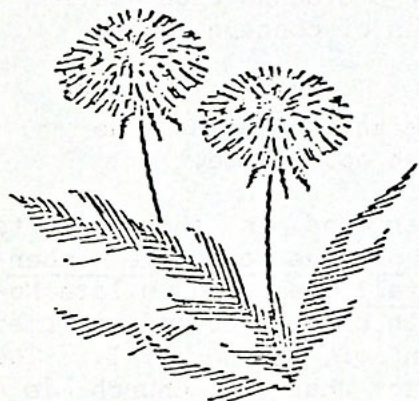
The trustees were heartened in these efforts by the Mission Statement of the Corporate Membership of St. Cloud Hospital, presented in late November. This document both challenged and affirmed the Board in its direction of the hospital. The sponsors stressed the fact that "the Church is a servant community in which the sick are to be cared

for, so that all persons may more fully realize their human potential and more readily enjoy life with God." They challenged the hospital to maintain a strong Catholic identity in its continued commitment to provide quality care and services in an environment in which all persons can grow to wholeness. The trustees are pleased to be entrusted with such a challenge at a time when there are so many indications that society is questioning the intrinsic value of human life and the innate dignity of the human person.

By its very nature, a health care facility such as St. Cloud Hospital is made up of many persons, each of whom is an important member of its serving, healing community. To all of them the Board expresses its sincere appreciation for the loving concern with which they serve and appeals to them to communicate Christ's values and reflect His love in this service. A special word of recognition is due to Mr. Gene Bakke, our dedicated and effective Chief Executive Officer. The Board acknowledges that it is his wisdom and experience, as well as his total commitment to the Catholic health care apostolate, that has enabled St. Cloud Hospital to be a vital instrument of the Church in her healing mission.

As Chairman of the Board, I extend my personal appreciation and gratitude to the members of the Board for their unquestionably genuine commitment to St. Cloud Hospital and its God-given mission. Their personal involvement in this mission is proof of their conviction that Catholic hospitals are needed in today's society. For their willingness to assume leadership in helping to further the continued existence and mission of St. Cloud Hospital and of the Catholic health care apostolate in general, they are truly deserving of gratitude. One of this year's trustees, Sister Rita Budig, will be leaving the Board since she has assumed the position of administrator of St. Benedict's Center. Her careful analysis of Board matters and her well-reasoned contributions have been greatly appreciated. While we regret her leaving the Board, we are happy that she will continue to be a member of our servant community.

With this report I bring to a close my years as President of the hospital. I take this occasion to thank God for having given me the privilege of sharing in His work on behalf of the sick and dying. I thank Him for His many blessings upon St. Cloud Hospital during these 16 years--blessings not merely in the physical and material order, but equally in the spiritual realm, as well as in all areas of human development. I thank all who in any way have been associated with the hospital and have helped to further its mission. I am grateful to Father Robert Harren for assuming the leadership of the Board and assure him of my earnest prayer for God's assistance. I am confident that under his leadership the presence of Christ and His influence will be enhanced at St. Cloud Hospital.



Sister Henrita Osendorf

Sister Henrita Osendorf
Chairman of the Board

EXECUTIVE VICE PRESIDENT



Gene S. Bakke

With the close of the fiscal year ended June 30, 1977, Saint Cloud Hospital has completed its forty-ninth year of service to the area under that name and in its present location, and the ninety-first year of leadership, guidance and direction in the provision of health services by the Sisters of the Order of St. Benedict. Over those years, many significant difficulties have been overcome that at the time must have seemed insurmountable. Yet, through faith, courage and commitment, the people of St. Cloud and surrounding area have been provided with a hospital that has always met or exceeded the standards of care considered essential, and its resources have been ready and available to serve the community every minute over those spans of time. In the meantime Saint Cloud Hospital has grown in size and stature to the point where it is regarded as a medical center.

A review of last year's statistics indicates that we are experiencing a change in the manner in which patients are treated. For example, for the first time in at least fifteen years we have experienced a decline in the number of inpatients admitted and the total number of patient days of service provided. This reflects a greater emphasis on treating people's health problems as outpatients, rather than being admitted to a hospital bed, thus hopefully reducing the over-all cost of care. This is a concept that we have actively supported by providing mechanisms for review of patient care (Quality Assurance Program), helping to expedite the discharge of patients at the earliest time (Social Service, Nursing Service) and in numerous other ways.

These efforts to reduce services to inpatients, of course, have the effect of creating some other problems. One of them is cost of care, since the volume of services becomes less and the level of care required becomes more acute, forcing per patient day costs further upward. At the same time we are faced with oppressive limitations and restrictions on revenues either existing or proposed by both federal and state governments.

The problems created by reduced inpatient services and restrictions on revenues will be significant and difficult, but viewed



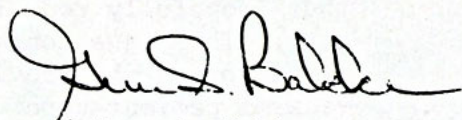
from the perspective of history, they are probably not nearly as critical as some of those that have been met and surmounted in the past. For example, there was a time during the depression years of the '30's when great sacrifice had to be made by the Sisters simply to pay interest on a loan that had to be made to pay just the interest on the original loan to construct the hospital in 1928. This spirit of dedication and sacrifice has been carried on through the years, providing us with an example that we would do well to look back to as we contemplate our future uncertainties and difficulties.

In terms of faith, dedication, devotion and sacrifice over the years, I am sure there have been many people who have exemplified those characteristics, most of whom I have never known. However, it has been my great privilege to have known and worked with one who, in my judgment, has epitomized these characteristics in her service to Saint Cloud Hospital. I am speaking, of course, of Sister Henrita Osendorf, O.S.B., who retired June 30, 1977, as President of the Board of Trustees after serving sixteen years in that important position.

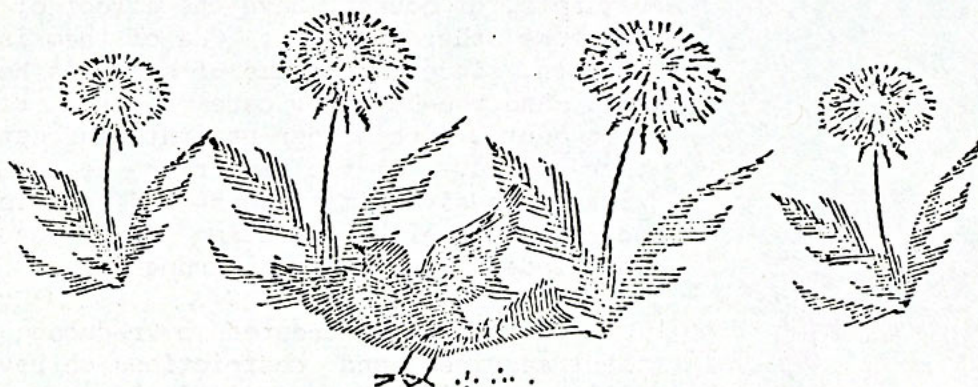
It is, indeed, most fitting that this Annual Report is dedicated to her as an expression of our deep and abiding praise and thanksgiving for her loyal and devoted service. Evidence of her wise and inspired leadership during those years abound. Taking a personal prerogative, I must say that she has been a source of advice, counsel, support and encouragement far beyond what I have ever experienced or had a right to expect. Although she continues as a member of the Hospital Board, her contribution as President will always be remembered with abiding gratitude.

In addition to Sister Henrita there is the entire Hospital family--the sponsors, the other members of the Board of Trustees, the medical and administrative staffs, all personnel and volunteers who deserve the highest commendation for their dedication to the care of patients. It demonstrates a Christian commitment worthy of our identity as a Catholic hospital. I am privileged and grateful to have been a part of it for another year.

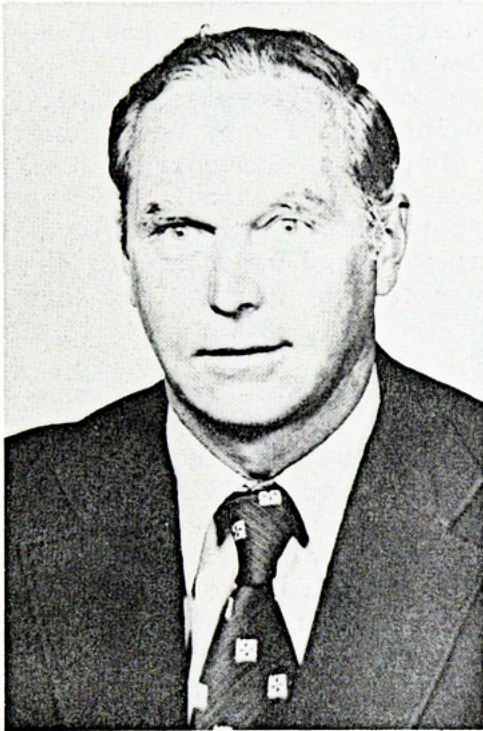




Gene S. Bakke
Executive Vice President



CHIEF OF THE MEDICAL STAFF



Dr. Severin H. Koop
Chief of the Medical Staff

The year 1976-77 was a growing year for our Medical Staff. It is my feeling that the Medical Staff Department concept was strengthened during this past year. Testimony to this fact is the acceptance of two-year terms for our Department Chiefs. This has been accomplished in the majority of departments, and I thank those individuals who were willing to take on this responsibility for a second year. This also allows for effective ongoing audits.

In mid-July of 1976 the Joint Commission on Accreditation of Hospitals survey team arrived at our hospital. After three days of intensive appraisal, they concluded that our hospital not only met the guidelines of the JCAH, but was perhaps the best hospital this JCAH survey team had ever examined. It was a moment of pride for all of us who attended the summation conference. To my predecessor, Dr. William Rice, and his Executive Committee, I extend thanks for such an excellent job in preparing the Medical Staff for this survey.

OFFICERS OF MEDICAL STAFF

Dr. Severin Koop

Dr. Roger Rovelstad,
Chief of Staff-Elect

Dr. Harry Windschitl,
Secretary

In September, 1976, an ad hoc committee of past Chiefs of the Medical Staff met to consider problems relative to the Joint Conference Committee. There had been ongoing problems regarding the Committee's functions. The Governing Board made a proposal to resolve this problem and our ad hoc committee accepted this proposal unanimously. As a result, the Joint Conference Committee became an on-call committee at the call of either the Chief of the Medical Staff or the Chairman of the Board of Trustees. Functions directly related to accreditation of the hospital were removed from the Joint Conference Committee. The Board of

Trustees proposal gave an ex officio membership on the Board of Trustees to the Chief of the Medical Staff. Through my personal experience this past year, I feel that this has been a mature and rewarding proposal for all concerned.

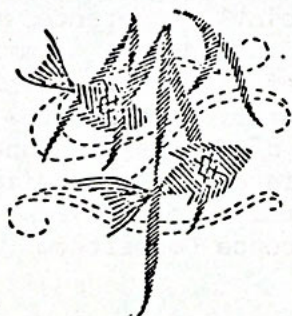
For the past few years the Department of Obstetrics-Gynecology has been under pressure from various community groups to allow husbands in the delivery room. The Department moved wisely and with purpose to resolve this community concern. In February, 1977, husbands were allowed in the delivery room under specific conditions developed by the Department of Obstetrics-Gynecology. Now, months later, it appears the program is working well. The Medical Staff is most appreciative of the time and efforts of the Department of Obstetrics-Gynecology. Rather than succumb to public opinion, they worked carefully to develop a program which would continue to enhance the excellent obstetrical care offered in this hospital.

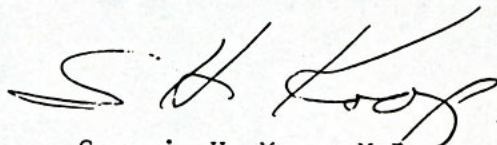
In November, 1976, the Minnesota Medical Association sent a team to survey our hospital in regard to accreditation for Category I Continuing Medical Education Credit for our Medical Staff education programs. Again, a survey team was more than impressed. As a result of this survey, our hospital has become a model by which other hospitals are measured. Needless to say, our Friday Forums, Medicine Department Case Presentations and Tumor Conferences now qualify for CME credits with the A.M.A., the Minnesota Medical Association and the Minnesota Academy of Family Practice. Our Director of Continuing Medical Education, Dr. Robert J. Cumming, has become actively involved in surveying other Minnesota hospitals' continuing education programs for accreditation.

In accepting the role of Chief of the Medical Staff, it was my concern that due to increasing outside governmental pressures affecting our common interests, the Medical Staff, the Governing Board and the Administration would have to develop supportive and cooperative attitudes and interests to resolve the many problems that might be presented. In the past year, I feel that this unity of interest and purpose has become a reality.

I would also like to mention the efforts of Beverly Christ and Toni Blenkush of the Medical Staff Office. These ladies have attended innumerable staff and committee meetings with efficiency and ready smiles. We owe them much. I also want to express a special "thank you" to the Clinical Department Chiefs for their support in the past year.

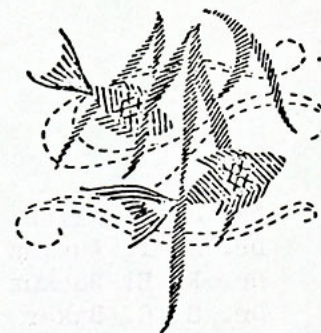
My thanks and appreciation are also extended to both Administration and the Governing Board of the St. Cloud Hospital. Through the years they have given endless support for education for Medical Staff members and a sincere openness to Medical Staff areas of concern. As a practicing physician I have been associated with many hospitals and it gives me great pleasure to say this is the finest.




Severin H. Koop, M.D.
Chief of the Medical Staff

MEDICAL STAFF

June 30, 1977



HONORARY MEDICAL STAFF

Dr. H. B. Clark Dr. C. S. Donaldson Dr. P. L. Halenbeck Dr. J. B. Gaida
Dr. G. H. Goehrs

ACTIVE MEDICAL STAFF

| | | |
|------------------------|---------------------|-----------------------|
| Dr. C. W. Alden | Dr. J. J. Hansen | Dr. J. P. O'Keefe |
| Dr. W. A. Autrey | Dr. D. L. Hanson | Dr. J. N. Olinger |
| Dr. J. J. Ballantine | Dr. J. T. Harbaugh | Dr. R. T. Petersen |
| Dr. B. R. Bancroft | Dr. D. C. Heckman | Dr. R. F. Rafferty |
| Dr. J. C. Bauman | Dr. J. E. Heeter | Dr. W. H. Rice |
| Dr. J. C. Belshe | Dr. W. J. Held | Dr. D. A. Ritchie |
| Dr. P. R. Berger | Dr. H. T. Hobday | Dr. R. A. Rovelstad |
| Dr. M. S. Bozanich | Dr. J. A. Iverson | Dr. A. T. Rozycki |
| Dr. H. J. Brattensborg | Dr. D. E. Jaeger | Dr. R. J. Scheuerell |
| Dr. J. F. Brix | Dr. B. L. John | Dr. R. A. Schlorf |
| Dr. H. M. Broker | Dr. G. L. Jurgens | Dr. E. J. Schmitz |
| Dr. F. T. Brown | Dr. P. B. Kavaney | Dr. R. A. Slanga |
| Dr. R. W. Burmaster | Dr. James H. Kelly | Dr. J. W. Smith |
| Dr. R. J. Cesnik | Dr. John F. Kelly | Dr. S. D. Sommers |
| Dr. T. L. Cress | Dr. R. P. Koenig | Dr. C. D. Stiles |
| Dr. R. J. Cumming | Dr. S. H. Koop | Dr. M. A. Stiles |
| Dr. L. V. Dahlquist | Dr. G. K. Kvistberg | Dr. R. L. Thienes |
| Dr. J. F. DeVinck | Dr. E. M. LaFond | Dr. C. B. Thuringer |
| Dr. E. H. Dziubinski | Dr. W. L. Lindquist | Dr. D. M. VanNostrand |
| Dr. C. P. Ehlen | Dr. L. A. Loes | Dr. J. W. Wahl |
| Dr. H. H. Engman | Dr. T. H. Luby | Dr. P. L. Warner |
| Dr. L. M. Espeland | Dr. J. R. Lyons | Dr. W. T. Wenner |
| Dr. A. D. Espelien | Dr. P. T. Moran | Dr. K. R. Williamson |
| Dr. L. M. Evans | Dr. T. G. Murn | Dr. H. E. Windschitl |
| Dr. M. C. Flanagan | Dr. R. A. Murray | Dr. L. H. Wittrock |
| Dr. J. M. Gacusana | Dr. V. E. Neils | Dr. T. L. Wyne |
| Dr. D. R. Gilchrist | | Dr. J. H. Zeleny |

ASSOCIATE MEDICAL STAFF

Dr. R. E. Fedor Dr. B. R. Rogers Dr. P. H. VanderStoep
Dr. J. A. Willie

COURTESY MEDICAL STAFF

| | | |
|--------------------------|--------------------|-----------------------|
| Dr. J. R. Allen | Dr. M. J. Gregg | Dr. S. J. Raetz |
| Dr. J. I. Ausman | Dr. C. W. Hall | Dr. R. J. Salk |
| Dr. R. E. Backus | Dr. C. E. Henke | Dr. R. R. Sawtell |
| Dr. C. C. Baker | Dr. B. J. Hughes | Dr. R. T. Schapiro |
| Dr. F. H. Baumgartner | Dr. D. D. Hurd | Dr. L. J. Schut |
| Dr. L. H. Bendix | Dr. M. D. Hurr | Dr. E. J. Seljeskog |
| Dr. J. B. Beuning | Dr. R. A. Jensen | Dr. P. M. Silverstein |
| Dr. R. C. Bonnabeau, Jr. | Dr. J. C. Kovacs | Dr. L. M. Simon |
| Dr. C. F. Brigham | Dr. S. R. Lancer | Dr. H. E. Sisk |
| Dr. I. L. Brodsky | Dr. R. J. Marsh | Dr. L. H. Stahn |
| Dr. K. V. Chilgren | Dr. G. M. Martin | Dr. R. C. Stoltz |
| Dr. S. N. Chou | Dr. R. E. Maxwell | Dr. H. H. Stonnington |
| Dr. T. H. Davis | Dr. R. Mueller | Dr. R. G. Tinkham |
| Dr. L. L. Dehnel | Dr. J. P. McNamara | Dr. L. A. Town |
| Dr. E. E. Emerson | Dr. B. A. Norback | Dr. R. F. Ulvestad |
| Dr. D. E. Erickson | Dr. O. C. Phares | Dr. L. T. Wood |
| Dr. L. A. French | Dr. T. Pladson | Dr. A. H. Zachman |
| Dr. R. F. Galbraith | | Dr. R. V. Zarling |

ACTIVE DENTAL STAFF

| | | |
|-----------------------|---------------------|----------------------|
| Dr. G. F. Baumgartner | Dr. H. S. Elliott | Dr. J. A. Muenzhuber |
| Dr. G. C. Cargill | Dr. J. F. Kline | Dr. D. C. Pull |
| Dr. K. L. Catton | Dr. J. H. Kropp | Dr. K. J. Richter |
| Dr. J. M. Collier | Dr. R. J. Lorbiecki | Dr. A. Simi |
| Dr. T. H. Como | Dr. D. J. Mackinac | Dr. D. R. Stromsborg |
| Dr. T. H. Dedolph | | Dr. R. Stromsborg |

ASSOCIATE DENTAL STAFF

Dr. J. H. Wenner

COURTESY DENTAL STAFF

| | |
|--------------------|----------------------|
| Dr. L. E. Carlson | Dr. G. C. Pappenfus |
| Dr. G. W. Cook | Dr. N. D. Pappenfus |
| Dr. R. P. Cook | Dr. J. B. Pike |
| Dr. D. L. Halstrom | Dr. J. M. Pike |
| Dr. R. M. Halstrom | Dr. J. J. Popp |
| Dr. L. Hanson | Dr. R. J. Provinzino |
| Dr. R. Hoghaug | Dr. T. G. Reichert |
| Dr. V. A. Licari | Dr. J. P. Schad |
| Dr. P. H. Moos | Dr. R. G. Schaefer |
| Dr. M. F. Mueller | Dr. W. J. Streed |
| Dr. N. B. Nelson | Dr. J. V. Urick |
| | Dr. N. L. Wolseth |



COMMITTEES OF THE MEDICAL STAFF

1976 - 1977

EXECUTIVE COMMITTEE

| | |
|----------------------|--------------------|
| *Dr. S. H. Koop | Dr. W. H. Rice |
| Dr. R. A. Rovelstad | Dr. T. L. Wyne |
| Dr. H. E. Windschitl | Dr. G. L. Jurgens |
| Dr. E. H. Dziubinski | Dr. P. L. Warner |
| Dr. R. W. Burmaster | Dr. B. R. Bancroft |
| Dr. L. M. Espeland | Dr. P. B. Kavaney |
| Dr. J. F. DeVinck | Dr. T. H. Dedolph |
| Dr. M. S. Bozanich | Dr. P. R. Berger |
| Dr. D. C. Heckman | Dr. R. J. Cumming, |
| Dr. D. R. Gilchrist | ex officio |

JOINT CONFERENCE COMMITTEE

| | |
|---------------------|-------------------|
| *Dr. S. H. Koop | Dr. W. H. Rice |
| Dr. R. A. Rovelstad | Dr. J. F. DeVinck |

BYLAWS COMMITTEE

| | |
|-----------------------|------------------|
| *Dr. J. J. Ballantine | Dr. James Kelly |
| Dr. T. H. Dedolph | Dr. W. H. Rice |
| Dr. E. M. LaFond | Dr. W. T. Wenner |

CREDENTIALS COMMITTEE

| | |
|----------------------|--------------------|
| *Dr. R. A. Rovelstad | Dr. C. W. Alden |
| Dr. R. Stromsborg | Dr. J. N. Olinger |
| Dr. E. M. LaFond | Dr. J. W. Smith |
| Dr. J. P. O'Keefe | Dr. R. T. Petersen |

EDUCATION - LIBRARY - MEDICAL RECORDS (ELMER) COMMITTEE

| | |
|----------------------|------------------|
| *Dr. R. J. Cumming | Dr. W. H. Held |
| Dr. R. J. Scheuerell | Dr. J. W. Wahl |
| Dr. L. H. Wittrock | Dr. J. R. Lyons |
| Dr. H. T. Hobday | Dr. F. T. Brown |
| Dr. J. J. Hansen | Dr. J. C. Belshe |

TRANSFUSION SUBCOMMITTEE

| | |
|-----------------------|--------------------|
| *Dr. H. E. Windschitl | Dr. W. H. Rice |
| Dr. K. R. Williamson | Dr. R. A. Slanga |
| Dr. D. M. VanNostrand | Dr. J. M. Gacusana |

UTILIZATION REVIEW COMMITTEE

| | |
|---------------------|-------------------|
| *Dr. B. R. Bancroft | Dr. C. P. Ehlen |
| Dr. L. V. Dahlquist | Dr. C. W. Alden |
| Dr. D. R. Gilchrist | Dr. A. T. Rozycki |
| Dr. W. L. Lindquist | |

ORGAN DONATION COMMITTEE

| | |
|--------------------|----------------|
| *Dr. J. F. DeVinck | Dr. J. F. Brix |
| Dr. H. T. Hobday | |

PHARMACY AND THERAPEUTICS COMMITTEE

| | |
|---------------------|------------------|
| *Dr. R. A. Schlorf | Dr. R. A. Slanga |
| Dr. R. W. Burmaster | Dr. J. W. Wahl |
| Dr. A. D. Espelien | |

INFECTION CONTROL COMMITTEE

| | |
|---------------------|-------------------|
| *Dr. J. H. Zeleny | Dr. C. W. Alden |
| Dr. M. S. Bozanich | Dr. E. M. LaFond |
| Dr. R. A. Rovelstad | Dr. A. T. Rozycki |
| Dr. J. F. DeVinck | Dr. J. W. Smith |

REHABILITATION COMMITTEE

| | |
|----------------------|----------------|
| *Dr. D. E. Jaeger | Dr. T. G. Murn |
| Dr. H. E. Windschitl | Dr. J. W. Wahl |
| Dr. J. F. Brix | |

RESPIRATORY CARE COMMITTEE

| | |
|----------------------|------------------|
| *Dr. W. L. Lindquist | Dr. J. C. Belshe |
| Dr. L. M. Espeland | Dr. B. L. John |
| Dr. R. A. Rovelstad | Dr. M. Stiles |
| Dr. K. R. Williamson | |

RADIOISOTOPE COMMITTEE

| | |
|----------------------|------------------|
| *Dr. P. VanderStoep | Dr. W. J. Held |
| Dr. J. J. Ballantine | Dr. R. A. Murray |
| Dr. H. E. Windschitl | Dr. P. R. Berger |

SURGICAL SUITE COMMITTEE

| | |
|----------------------|-------------------|
| *Dr. B. R. Bancroft | Dr. T. L. Wyne |
| Dr. D. R. Gilchrist | Dr. G. L. Jurgens |
| Dr. E. H. Dziubinski | Dr. J. F. Brix |
| Dr. L. M. Espeland | Dr. P. B. Kavaney |

EMERGENCY - OUTPATIENT COMMITTEE

| | |
|-----------------------|------------------|
| *Dr. T. L. Cress | Dr. D. E. Jaeger |
| Dr. D. M. VanNostrand | Dr. T. G. Murn |
| Dr. L. V. Dahlquist | Dr. M. Stiles |
| Dr. J. P. O'Keefe | |

INTENSIVE CARE UNIT COMMITTEE

| | |
|---------------------|--------------------|
| *Dr. F. T. Brown | Dr. A. D. Espelien |
| Dr. R. A. Rovelstad | Dr. H. H. Engman |
| Dr. L. V. Dahlquist | Dr. J. F. Brix |

CORONARY CARE UNIT COMMITTEE

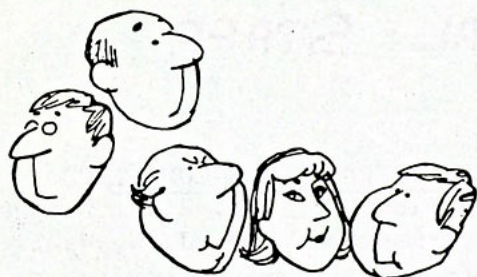
| | |
|-----------------|-----------------|
| *Dr. D. Hanson | Dr. V. E. Neils |
| Dr. James Kelly | Dr. M. Stiles |

ALCOHOL AND CHEMICAL DEPENDENCY UNIT COMMITTEE

| | |
|---------------------|--------------------|
| *Dr. V. E. Neils | Dr. R. F. Rafferty |
| Dr. H. Brattensborg | Dr. R. L. Thienes |
| Dr. W. L. Lindquist | |

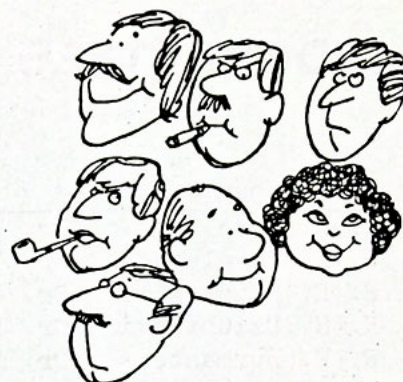
*Chairman





OCCUPANCY

1976 - 1977



General Hospital

| | |
|---|--------|
| Patients at midnight on June 30, 1976..... | 365 |
| Inpatient admissions, July 1, 1976 to June 30, 1977..... | 16,952 |
| Newborn..... | 1,857 |
| Total number of inpatients given care in fiscal 1977..... | 19,174 |

| | |
|---|--------|
| Deaths..... | 307 |
| Inpatients discharged..... | 18,482 |
| Patients at midnight June 30, 1977..... | 385 |

Daily average number of inpatients discharged and deaths..... 51

Daily average number of Emergency-Outpatient Department patients,
emergency and scheduled (22,585)..... 62

Daily average number of outpatient registrations (24,071)..... 66

Adults and Children

| | 1977 | 1976 | 1975 |
|----------------------|--------------------------|--------------------------|----------|
| Patient days | 126,861 | 129,173 | 129,024 |
| Average daily census | 348 | 353 | 353 |
| % of occupancy | 77% | 81.5% | 82% |
| Average stay | 7.5 days | 7.5 days | 7.6 days |
| Bed complement | 446 7/1/76 - 1/27/77 | 430 7/1/75 - 12/31/75 | 430 |
| | 456 1/28/77 - 6/30/77 | 436 1/1/76 - 6/30/76 | |

Newborn

| | | | |
|----------------------|----------|----------|----------|
| Patient days | 6,777 | 6,727 | 6,192 |
| Average daily census | 19 | 18 | 17 |
| % of occupancy | 48% | 46% | 43% |
| Average stay | 3.6 days | 3.7 days | 3.7 days |
| Bassinet complement | 40 | 40 | 40 |

Outpatients

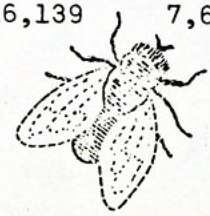
| | | | |
|--------------------------|--------|--------|--------|
| Emergency visits | 14,105 | 14,612 | 13,066 |
| Outpatient registrations | 24,071 | 23,831 | 22,514 |

Skilled Nursing Facility

| | | | |
|----------------------|---------|---------|---------|
| Admissions | 288 | 265 | 211 |
| Patient days | 5,008 | 4,998 | 4,094 |
| Average daily census | 14 | 14 | 11 |
| % of occupancy | 56% | 56% | 44% |
| Average stay | 18 days | 19 days | 20 days |
| Bed complement | 25 | 25 | 25 |

Highest combined census: 484 on April 21, 1977

| Speaking statistically | 1977 | 1976 |
|--|--------------|--------------|
| Inpatient admissions, "acute" hospital | 16,952 | 17,115 |
| Admissions, Skilled Nursing Facility | 288 | 265 |
| Births | 1,857 | 1,769 |
| Patient days, "acute" hospital | 126,861 | 129,174 |
| Patient days in Skilled Nursing Facility | 5,008 | 4,998 |
| Newborn Nursery days | 6,777 | 6,727 |
| Emergency Room patients (all). | 22,585 | 23,161 |
| Outpatients as reported by Data Processing*. | 40,680 | 43,233 |
| *Excludes routine employee lab tests and x-rays | | |
| Physicians on Medical Staff (all). | 142 | 137 |
| Dentists on Medical Staff (all). | 41 | 40 |
| Employees, full and part-time. | 1,459 | 1,437 |
| Total hours paid | 2,292,925 | 2,072,339 |
| Wages and salaries paid. | \$11,726,794 | \$10,412,287 |
| Blood transfusions (bottles) | 3,376 | 2,799 |
| Blood bank procedures. | 18,350 | 17,809 |
| Clinical laboratory tests. | 279,898 | 316,855 |
| Tissue examinations. | 19,332 | 19,623 |
| Total autopsies. | 86 | 101 |
| Laboratory tests for other hospitals | 507 | 671 |
| Electroencephalograms. | 1,004 | 1,040 |
| Electrocardiograms | 10,157 | 10,025 |
| X-ray examinations | 48,506 | 49,374 |
| Ultrasonography. | 189 | 0 |
| Radiation and radioisotope therapy | 5,865 | 3,845 |
| Radioisotope scans | 1,916 | 1,971 |
| Surgical Procedures in OR. | 7,352 | 7,254 |
| Anesthetics in OR, ER and DR | 8,499 | 8,394 |
| Respiratory therapy. | 103,228 | 79,916 |
| Physical therapy treatments. | 60,675 | 55,677 |
| Speech therapy, Occupational therapy, and Recreational therapy (treatment units). | 81,878 | 75,520 |
| Pharmacy prescriptions | 470,447 | 427,022 |
| Meals served | 706,072 | 670,798 |
| Purchase orders issued | 7,997 | 6,646 |
| Value of supplies dispensed from storeroom | \$1,654,082 | \$1,545,963 |
| Pounds of linen processed. | 1,819,713 | 1,866,660 |
| Units cleaned on discharge or transfer of patient | 25,514 | 24,997 |
| Total square footage cleaned daily | 419,617 | 419,617 |
| Cubic feet of gas used by boilers. | 85,472,000 | 114,597,000 |
| Pounds of steam used | 114,346,062 | 107,272,205 |
| Gallons of oil used by boilers | 271,682 | 21,108 |
| Gallons of water used. | 60,761,918 | 56,109,044 |
| Requests to maintenance for repairs. | 21,115 | 16,104 |
| Kilowatt hours used. | 8,016,139 | 7,694,562 |

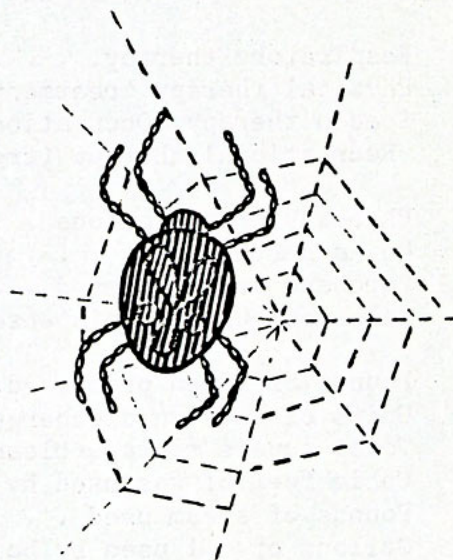


DATA ON PATIENTS DISCHARGED

| Service | July 1, 1976 | | | | June 30, 1977 | | Consults. | | Hosp. Days | Avg. Stay |
|--------------------|--------------|--------|------|-------|---------------|------|-----------|-----|------------|-----------|
| | Patients | Deaths | | | Autopsies | | | | | |
| | | No. | % | P.O. | No. | % | No. | % | | |
| Medicine | 4667 | 211 | 4.5% | 1+3* | 35 | 17% | 1334 | 29% | 32445 | 7.0 d. |
| Surgery | 2250 | 29 | 1.2% | 27+4* | 4 | 14% | 758 | 34% | 18155 | 8.1 d. |
| Obstetrics: | | | | | | | | | | |
| Del'd > 20 wk. | 1858 | | | | | | 66 | 4% | 6814 | 3.7 d. |
| Del'd < 20 wk. | 184 | | | | | | 11 | 6% | 364 | 2.0 d. |
| Not delivered | 243 | | | | | | 12 | 5% | 606 | 2.5 d. |
| Gynecology | 933 | 5 | 0.5% | 1 | 2 | 40% | 210 | 23% | 5280 | 5.7 d. |
| Ophthalmology | 471 | | | | | | 101 | 21% | 2191 | 4.7 d. |
| E.N.T. | 795 | | | | | | 88 | 11% | 2297 | 2.9 d. |
| Urology | 1243 | 9 | 0.7% | 2+1* | 1 | 11% | 489 | 39% | 8024 | 6.5 d. |
| Orthopedics | 2030 | 5 | 0.2% | 2 | | | 719 | 35% | 18575 | 9.2 d. |
| Dermatology | 53 | | | | | | 16 | 30% | 372 | 7.2 d. |
| Pediatrics | 710 | 1 | 0.1% | | 1 | 100% | 48 | 7% | 3066 | 4.3 d. |
| Communicable | 52 | | | | | | 5 | 10% | 294 | 5.7 d. |
| Neurology | 246 | 8 | 3.2% | | 1 | 13% | 113 | 46% | 2384 | 9.7 d. |
| Psychiatry, 2 West | 505 | | | | | | 307 | 61% | 11014 | 21.8 d. |
| Psychiatry, A&C | 383 | | | | | | 77 | 20% | 10990 | 28.7 d. |
| Neurosurgery | 299 | 15 | 5.0% | 11 | 3 | 20% | 154 | 52% | 3477 | 11.6 d. |
| Radiotherapy | 13 | | | | | | 5 | 38% | 90 | 6.9 d. |
| Total | 16935 | 283 | 1.6% | 44+8* | 47 | 17% | 4513 | 27% | 126438 | 7.5 d. |
| Newborn | 1854 | 24 | 1.2% | | 5 | 21% | 25 | 1% | 6733 | 3.6 d. |
| ALL PATIENTS | 18789 | 307 | 1.6% | 44+8* | 52 | 17% | 4538 | 24% | 133171 | |

*8 postoperative deaths in the Skilled Nursing Facility. The postoperative death rate is 0.8%. This is the number of deaths (52) compared with all inpatients who had surgery exclusive of observation cystoscopy and procedures in the Emergency Room (6459). Postoperative period is 30 days after surgery.

| Age | 1977 | 1976 | 1975 |
|---------------------|-------|-------|-------|
| Newborn | 1854 | 1769 | 1673 |
| 0 - 2 | 515 | 536 | 547 |
| 2 - 14 | 1124 | 1274 | 1262 |
| 14 - 30 | 4689 | 4442 | 4545 |
| 30 - 40 | 1738 | 1741 | 1723 |
| 40 - 50 | 1452 | 1603 | 1637 |
| 50 - 60 | 1885 | 1940 | 2000 |
| 60 - 65 | 1060 | 1136 | 1022 |
| 65 - 70 | 1076 | 1103 | 987 |
| 70+ | 3396 | 3360 | 3130 |
| Male patients | 7926 | 7880 | 7877 |
| Female patients | 10863 | 11032 | 10649 |
| Catholic patients | 12053 | 11924 | 11655 |
| Protestant patients | 6356 | 6624 | 6405 |
| Other | 380 | 364 | 466 |



SKILLED NURSING FACILITY

1976 - 1977

AGE OF PATIENTS

| | |
|---------|-----|
| 15 - 30 | 0 |
| 30 - 40 | 4 |
| 40 - 50 | 1 |
| 50 - 60 | 7 |
| 60 - 65 | 11 |
| 65 - 70 | 27 |
| 70+ | 247 |

DISCHARGE ANALYSIS

| Service | Patients | Deaths | Autopsies | Cons. | Days Stay |
|------------------|----------|--------|-----------|-------|-----------|
| Medicine | 155 | 41 | 6 | 24 | 2560 |
| Surgery | 45 | 6 | | 8 | 842 |
| Gynecology | 10 | 3 | | 1 | 115 |
| Urology | 33 | 1 | | 5 | 493 |
| Orthopedics | 18 | 4 | 1 | 4 | 389 |
| Ophthalmology | 1 | 1 | | | 64 |
| ENT | 4 | 1 | | | 130 |
| Neurology | 16 | 5 | | 1 | 295 |
| Psychiatry | 1 | | | | 14 |
| Dermatology | 1 | | | | 21 |
| Neurosurgery | 6 | | | 2 | 153 |
| OB Not Delivered | 1 | | | | 34 |
| TOTAL | 291 | 62 21% | 7 11% | 45 | 5110 |



Consultation Rate: 15.4%

Average Stay: 17.6 days

| | | | | | |
|--------|-----|-----------------|-----|------------|-----|
| Male | 139 | From: St. Cloud | 106 | Catholic | 167 |
| Female | 152 | Other | 185 | Protestant | 121 |
| | | | | Other | 3 |

Patients under 65: 23

Patients over 65: 268

Total stay: 404 days

Total stay: 4706 days

Average stay: 17.6 d.

Average stay: 17.6 d.

OCCUPANCY



| | |
|--|------------|
| Census June 30, 1976 | 16 |
| Patients transferred from general hospital | 278 |
| Other admissions | 10 |
| | <u>304</u> |



| | |
|--|-----------|
| Patients discharged. | 229 |
| Deaths | 62 |
| Patients in Skilled Nursing Facility June 30, 1977 | <u>13</u> |

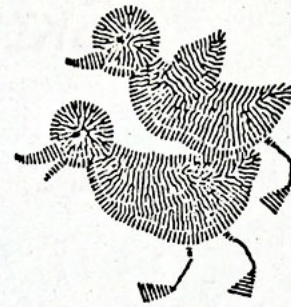


| | |
|--------------------------|-------------|
| Patient days in 1976-77. | 5012 |
| Less pass. | 4 |
| Net patient days | <u>5008</u> |

| | |
|------------------------------|-----|
| Daily average census | 14 |
| Rate of occupancy (25 beds). | 56% |

FINANCIAL REPORT

1976 - 1977



| Patient Charges | Amount | | Per cent | |
|--|--------------|--------------|----------|---------|
| | 1977 | 1976 | 1977 | 1976 |
| Room and care | \$11,133,558 | \$9,777,702 | 51.95% | 51.39% |
| Nursery and Delivery Room . . | 708,850 | 635,092 | 3.31 | 3.34 |
| Operating Room. | 1,486,377 | 1,212,006 | 6.94 | 6.37 |
| Central Service | 935,303 | 840,417 | 4.36 | 4.42 |
| Laboratories. | 1,679,120 | 1,644,084 | 7.83 | 8.64 |
| Radiology | 1,586,197 | 1,388,244 | 7.40 | 7.30 |
| Pharmacy. | 1,377,964 | 1,356,460 | 6.43 | 7.13 |
| Anesthesia and Recovery Room. | 653,760 | 536,060 | 3.05 | 2.82 |
| Physical Therapy. | 489,072 | 384,213 | 2.28 | 2.02 |
| Respiratory Therapy | 502,985 | 425,382 | 2.35 | 2.24 |
| Emergency-Outpatient. | 514,123 | 422,610 | 2.40 | 2.23 |
| Other | 435,877 | 404,939 | 2.03 | 2.13 |
| Total. | \$21,503,186 | \$19,027,209 | 100.33% | 100.03% |
| Less allowances to third party payors. | 1,013,300 | 1,146,256 | 4.73 | 6.03 |
| | \$20,489,886 | \$17,880,953 | 95.60% | 94.00% |
| Other income. | 942,064 | 1,141,326 | 4.40 | 6.00 |
| TOTAL INCOME | \$21,431,950 | \$19,022,279 | 100.00% | 100.00% |

| Operating Expenses | | | | |
|--------------------------------|--------------|--------------|-------|-------|
| Nursing Division. | 8,053,352 | 6,651,052 | 37.58 | 34.97 |
| Medical Support Division. . . | 4,083,701 | 4,667,592 | 19.05 | 24.54 |
| Rehab. and Counseling Div. . . | 1,600,855 | 1,069,434 | 7.47 | 5.62 |
| Fiscal and General Division . | 1,343,330 | 2,056,785 | 6.27 | 10.81 |
| Personnel Division. | 2,204,451 | 2,173,134 | 10.28 | 11.42 |
| Planning and Development Div. | 1,388,121 | 64,664 | 6.48 | .34 |
| Other | 2,117,350 | 1,812,690 | 9.88 | 9.53 |
| TOTAL OPERATING EXPENSES | \$20,791,160 | \$18,495,351 | 97.01 | 97.23 |

| | | | | |
|---|------------|------------|-------|-------|
| NET INCOME FOR INVESTMENT IN NEW SERVICES & EQUIPMENT . . | \$ 640,790 | \$ 526,928 | 2.99% | 2.77% |
|---|------------|------------|-------|-------|

| ASSETS | | |
|---------------------------------------|--------------|--------------|
| | 1977 | 1976 |
| Patient Accounts Receivable | \$ 3,347,616 | \$ 3,069,869 |
| Inventories | 527,565 | 585,683 |
| Land, Buildings & Equipment | 23,192,287 | 22,245,575 |
| Building Projects under Construction. | 3,443,565 | 163,799 |

John Seckinger
John Seckinger, Controller

DEPARTMENT OF ANESTHESIOLOGY

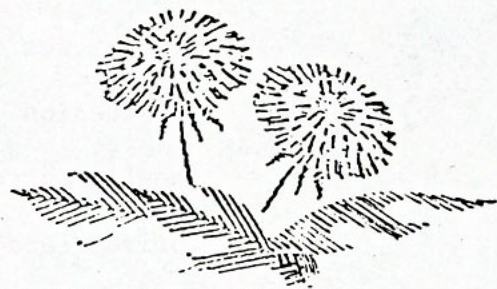
1976 - 1977

We have experienced another busy year in our department, with over 7,000 anesthetics having been administered. Throughout the year we have continued to hold monthly meetings in an effort to define ways in which we can continue to improve the quality of care delivered to our patients.

We have increased our coverage of the obstetrical suite by adding a relief shift specifically to respond more efficiently to this need.

Continuing education has occupied many of our members, a number of individuals having attended seminars and conferences at various locations throughout the state and country. The department contributed to the Medical Staff Forums three times in the past year with discussions on our Pulmonary Function Laboratory, Postoperative Hepatic Dysfunction, and Proper Use of Local Anesthesia.

We give special recognition to Fran Landwehr, who recently obtained her B.S. Degree in Anesthesia from the University of Minnesota. This accomplishment represents a great deal of time and effort . . . Congratulations, Fran!



The Anesthesia staff has completed the large task of updating and clarifying our procedures manual, infection control policies and equipment inventories throughout the hospital. This effort contributed to the fine rating given our department by the Joint Commission on Accreditation of Hospitals.

In August, 1976, we all enjoyed a somewhat sentimental occasion. The final class of the St. Cloud School of Anesthesia was graduated at a dinner in their honor. This event was combined with a reunion of all former graduates of the school. It was well attended and enjoyed by all a time for seeing old friends and renewing past acquaintances.

We look forward to continuing our services to the hospital and the community during the coming year.

L. M. Espeland M.D.

L. M. Espeland, M.D.
Chief, Department of Anesthesiology

Eileen Stafford C.R.N.A.

Eileen Stafford, C.R.N.A.
Department Head



DEPARTMENT OF DENTISTRY

1976 - 1977



The Department of Dentistry was represented by members on three standing Medical Staff committees and was responsible for Friday Forums.



During our departmental meetings there was considerable information and discussion concerning the regulatory health systems and their impact on the private and hospital practice of dentistry.



A concurrent audit on dentoalveolar pathology is in progress.

Dr. J.H. Kropp and Dr. J.H. Wenner were elected as Chief and Vice Chief of the Department of Dentistry for the year 1977-78.

Theodore H. Dedolph, D.D.S., M.S.D.
Chief, Department of Dentistry

EMERGENCY - OUTPATIENT DEPARTMENT

1976 - 1977

The number of patient visits to the Emergency-Outpatient Department has become stable the past few years. In the past year emphasis was placed on improving the quality of care given to patients. Services were updated, audits performed, inservices provided and the quality assurance program was improved.

The repeat audit of E-OP records showed a definite improvement in detail completion. The record form itself was revised in order to facilitate inclusion of details such as allergies, disposition of patient and condition on discharge. Criteria for a combined medical-nursing audit on emergency room treatment of fractures of long bones of the extremities have been selected and this audit will be completed early in the next fiscal year.

Due to Dr. Emerson's prolonged medical leave of absence, changes were made in the physician coverage provided by the C.M.M.S. Hours were expanded slightly so that at present there is a physician on duty from 6 p.m. to 6 a.m. Monday thru Thursday and from noon to 6 a.m. on Friday, Saturday and Sunday. The number of patients seen by this group has steadily increased and presently they see 51% of the patients who present themselves for emergency care.

The purchase of improved monitoring equipment proved very worthwhile. 426 patients were monitored compared with 288 last year. In addition, 931 patients had IV therapy initiated; 2,237 lacerations were sutured; 491 casts applied; and 924 outpatients were prepared for surgery.

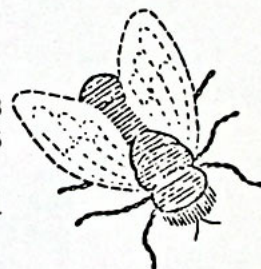
As we look back over the past year we need to express sincere appreciation to all the other departments of St. Cloud Hospital because we could not function effectively without their continued cooperation and the fine services they provide. It is with pleasure and enthusiasm that we look forward to another year of working together with the entire Medical Staff and employees of St. Cloud Hospital to provide excellent quality care to everyone who comes to us. Statistics show a small over-all decrease in patients.

| | 1976 - 1977 | 1975 - 1976 |
|----------------------------------|-------------|-------------|
| Unscheduled patients | 17930 | 18380 |
| Admitted | 4655 (26%) | 3768 (21%) |
| Released | 13275 (74%) | 14612 (79%) |
| Patients seen by CMMS physicians | 8414 | 7413 |
| Call list used | 679 | 646 |
| Scheduled patients | 4655 | 4781 |
| Neurology consults, EMG's | 1398 (30%) | 1452 (30%) |
| Proctoscopy | 1641 (35%) | 1877 (39%) |
| Other endoscopy | 286 (6%) | 241 (5%) |
| Miscellaneous procedures | 1330 (29%) | 1211 (25%) |

Day with most unscheduled patients April 23--92 June 13--97

Betty Turck, R.N.
 Betty Turck, R.N.
 Emergency-Outpatient Supervisor

Thomas Cress, M.D.
 Thomas Cress, M.D., Chairman
 Emergency-Outpatient Committee



DEPARTMENT OF MEDICINE

1976 - 1977

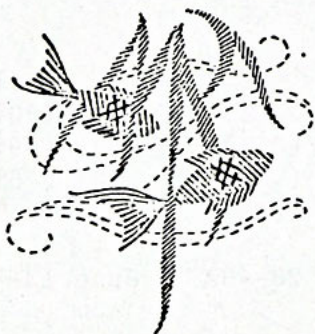
In fiscal 1977 the Department of Medicine again had a very successful year. We continued to have weekly Monday morning meetings--once a month for business and the others (September through June) for our Medical Education sessions. These were very well attended. Members of the Medical Staff other than internists began to attend this year and showed a very good response. The papers for these sessions are prepared and presented by the internists.

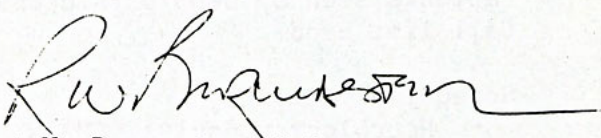
The department is also quite involved in Friday noon Forums for which they engaged speakers on cardiologic disease. Dr. John Briggs and Dr. James Daniel came from St. Paul-Ramsey Hospital and Northwestern Hospital in Minneapolis and gave very excellent presentations on topics that interested the Medical Staff generally and provoked good discussions.

In addition to the educational aspect of the department we were involved in assisting in procurement of more equipment to further the care of patients in the St. Cloud Hospital. More monitoring devices were obtained for the telemetry service on 4 South and Dr. Joseph Belshé established a Pulmonary Function Laboratory which is very sophisticated and is able to perform pulmonary diffusion studies as well as the usual pulmonary function tests.

The internists are called upon often to assist the Utilization Review Coordinator.

I am pleased to announce that our new officers for the year 1977 through 1978 will be Dr. David L. Hanson who very ably assisted me as Assistant Chairman. Dr. Mary Stiles will be the Assistant Chairman for the coming year. I most enjoyed being Chairman of the Department of Internal Medicine.




Robert W. Burmaster, M.D.
Chief of Medicine

DEPARTMENT OF OBSTETRICS - GYNECOLOGY

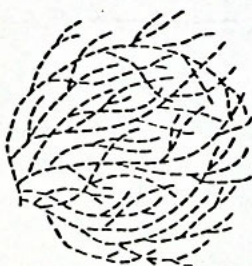
1976 - 1977

| | 1977 | 1976 | 1975 |
|------------------------------------|------------|------------|------------|
| Mothers delivered | 1858 | 1776 | 1668 |
| Spontaneous delivery | 1414 | 1334 | 1295 |
| Forceps delivery | 207 | 265 | 241 |
| Breech or manual | 61 | 36 | 35 |
| Cesarean section | 176 (9.4%) | 141 (7.9%) | 97 (5.8%) |
| Maternal deaths | None | None | None |
| Male infants discharged | 969 | 928 | 851 |
| Female infants discharged | 885 | 849 | 822 |
| Weight of largest baby that lived | 11# 1½ oz. | 12# 8 oz. | 11# 9½ oz. |
| Weight of smallest baby that lived | 2# 2 oz. | 2# 10½ oz. | 2# 9 oz. |
| Total live births | 1857 | 1769 | 1676 |
| Viable births (by weight) | 1847 | 1758 | 1676 |
| Non-viable by weight | 10 | 11 | |
| Twin births | 11 | 14 | 10 |
| Triplet births | None | None | None |
| All newborn deaths | 24 or 1.2% | 24 or 1.3% | 7 or 0.4% |
| Deaths of babies > 1000 grams | 14 or 0.7% | 13 or 0.7% | 7 or 0.4% |
| Autopsy rate for newborn | 21% | 25% | 57% |
| Number of stillbirths | 18 | 14 | 7 |
| Autopsies on stillbirths | 6 | 4 | 1 |

1977 ushered in the third century of our nation as a republic--it was also the year fathers were allowed in the Delivery Room at St. Cloud Hospital! To date, no significant problems have arisen because of this change in policy. Prenatal classes have experienced a significant rise in attendance, perhaps reflecting an increased interest in parenting.

Deliveries increased by approximately 5%. The cesarean section rate also increased, as it did throughout the nation. Recent studies have justified this increase, reflected by the lower fetal morbidity rate nationally. There were no maternal deaths.

The Obstetrics-Gynecology Department presented a Friday Forum in August on stapling techniques in surgery and in November on anaerobic infections. There is a continuous audit of hysterectomies and newborn deaths.



Emil H. Dziubinski
Emil H. Dziubinski, M.D.
Chief of Obstetrics-Gynecology



OPHTHALMOLOGY AND OTOLARYNGOLOGY DEPARTMENT

1976 - 1977

Audits have been completed on tonsillectomies and adenoidectomies as well as on cataract extraction. An audit is being done on chronic otitis media at the present time.

New books purchased by the department include Perhkof's Atlas of Anatomy, Paprella's three-volume series entitled Otolaryngology, plus a textbook titled Pediatric Ophthalmology. The department has recommended the purchase of subscriptions to Archives of Otolaryngology, Laryngoscope, and Survey of Ophthalmology.

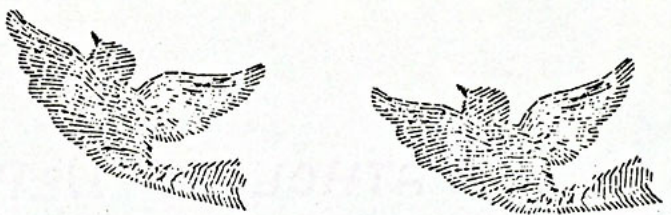
An ophthalmologic operating microscope by Weck is the new instrument used by the Ophthalmology Department.

STATISTICS

| OPHTHALMOLOGY | 1977 | 1976 | Change |
|-----------------------------------|-----------|----------|------------|
| Inpatients | 471 | 459 | +12 |
| Consultations requested | 101 (21%) | 81 (18%) | +20 (+3%) |
| Average length of stay | 4.7 d. | 4.5 d. | +0.2 d. |
| Surgical procedures on inpatients | 479 | 467 | +12 |
| Outpatient surgery in O.R. | 44 | 39 | + 5 |
| Consultations rendered | 127 | 119 | + 8 |
| | | | |
| OTORHINOLARYNGOLOGY | | | |
| Inpatients | 795 | 925 | -130 |
| Consultations requested | 88 (11%) | 78 (8%) | + 10 (+3%) |
| Average length of stay | 2.9 d. | 2.8 d. | +0.1 d. |
| Surgical procedures on inpatients | 590 | 672 | - 82 |
| Outpatient surgery in O.R. | 46 | 89 | - 43 |
| Consultations rendered | 237 | 261 | - 24 |



Gerald L. Jurgens, M.D.
Gerald L. Jurgens, M.D.
Chief of Ophthalmology and Otolaryngology



DEPARTMENT OF ORTHOPEDIC SURGERY

1976 - 1977

Over the past year the Department of Orthopedics has continued to meet monthly and has remained a very active and progressive department. The monthly meetings have been aided by adding a second member of the Family Practice Department to our present members. We have continued to cover orthopedic and administrative matters directly related to the Orthopedic Department.

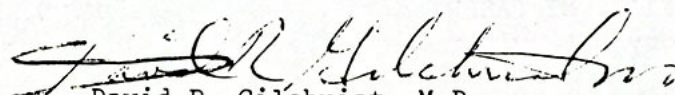
Several things are especially worthy of note. The number of both inpatients and outpatients classified orthopedic has continued to rise. There were 2,030 patients for the year 1976-1977 compared with 2,007 the previous year. Consultations increased from 522 to 585. The average patient stay has remained fairly constant at 9.7 days.

Doctor LaFond has continued to monitor our infection rate. Over the past year there were 880 elective cases and 10 infections for a 1.1 per cent infection rate, and 114 open fractures with 5 infections for a 5 per cent infection rate. Both of these figures represent numbers well below the national average at this stage. A follow-up audit on internal derangements of the knee was completed. Sixty-seven patients were included and all met the criteria for hospital stay and adequate care.

One of the greatest improvements in our orthopedic care has been use of the Saab Image Intensifier in surgery. This has greatly improved our surgical treatment of hip fractures and we are discovering many additional uses for this equipment.

The nursing staff continues to be committed to active involvement in continuing education to maintain and enhance their knowledge of orthopedic nursing care. The Orthopedic Department continues to furnish inservices monthly. Nursing constantly has a high ratio of staff attendance at the monthly inservices. The staff has participated in quality assurance programs in nursing. A nursing audit of intertrochanteric fractures of the femur was completed this year with results indicating that quality nursing care has been delivered. Nursing has worked at improving the documentation of care to meet audit criteria and to make charting accurate and complete. Care planning for patient need programs and concerns, as well as patient and family education and eventually discharge planning, has been an increasing responsibility of the nurse and is a service which has greatly improved the quality of nursing care on the orthopedic unit. Another highlight of accomplishment has been the revision and completion of the orthopedic nursing procedure manual by Colette Haakonson, R.N., and Jo Fettig, R.N. Newly updated, it will serve as a guide to promote standard quality nursing care on Six South.

I have the distinct honor to continue as Chief of the Department of Orthopedics for the coming year. I see one of our major goals as attempting to further update the quality of care given to the orthopedic patient at the St. Cloud Hospital.



David R. Gilchrist, M.D.
Chief of Orthopedic Surgery

PATHOLOGY DEPARTMENT

1976 - 1977

The laboratory received certification and accreditation by the College of American Pathologists early in the past year, and has subsequently undergone an interim self-inspection and evaluation under the auspices of the College of American Pathologists.

The American Association of Blood Banks inspected and certified the Blood Bank for two years. The Food and Drug Administration also performed an annual inspection of the Blood Bank and found no discrepancies.

In July, 1976, a general 12-test battery of screening serum chemistry tests for inpatients was offered for the first time. After one year of experience with this service, it appears to have been well received.

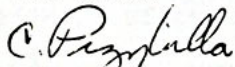
CPK and LDH isoenzyme testing for diagnosis of myocardial and other tissue damage is now being performed on patients with suspected myocardial infarction. Additional new tests now being performed on site include Serum Cortisol and Serum TSH. Other tests which the laboratory expects to perform early next year include the Fluorescent Serum Antinuclear Antibodies test, Serum Dilantin, and Serum Total Estriol.

Numerous classes and workshops were attended by many members of the department to prepare them for the proper uses of the more sophisticated instruments and procedures being performed in our laboratory. In these programs, both St. Cloud State University and St. John's University faculty provided instruction, along with the Mayo Clinic, the Red Cross Blood Center, the Communicable Disease Center, the State Department of Health, and Area Health Education Consortium.

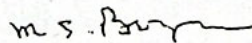
Four students graduated from the School of Medical Technology in August, in the last class of the 3+1 program. The 2+2 Medical Technology training course, which is affiliated with St. Cloud State University, has a total of twelve students in the junior and senior classes. These students spend time in our laboratory throughout each of two years, in conjunction with their course work at St. Cloud State University, rather than full time for one year as in the past. The first group, the seniors, will complete their training in August, 1977.

Efforts are underway to improve the timeliness of laboratory reports reaching both physicians and patient charts. Certain facets of these needed improvements appear to be dependent on new and expanded computer capability.

As for review of our quality control, we have now introduced, in addition to existing external and internal quality control testing which is a constant part of our daily work, a continuous daily review of total assembled and printed computerized laboratory data according to special subdivisions of work (Hematology, Bacteriology, Chemistry, etc.). This also opens a wide range of possibilities for future applications, if our computer system develops larger capacity and flexibility for handling the data.



C. Przybilla, MT (ASCP)
Laboratory Supervisor



M. S. Bozanich, M.D.
Director of Laboratories

DEPARTMENT OF PEDIATRICS

1976 - 1977

The Department of Pediatrics continues to meet monthly on administrative and professional matters and to review quality of care. An audit on urinary tract infection in children was completed. The Department was pleased with the result.

Statistics show a small decrease in the number of patients:

| | 1977 | 1976 | 1975 |
|---------------------------|------|------|------|
| Patients under age 2 | 515 | 536 | 547 |
| Patients age 2 to 14 | 1124 | 1274 | 1262 |
| General Medicine..... | 710 | 788 | 760 |
| General Surgery..... | 228 | 227 | 205 |
| Gynecology..... | 5 | 5 | 6 |
| Orthopedics..... | 125 | 161 | 146 |
| Urology..... | 119 | 114 | 118 |
| Dermatology..... | 8 | 8 | 4 |
| Ophthalmology..... | 78 | 63 | 77 |
| Ear, Nose and Throat..... | 270 | 346 | 398 |
| Communicable..... | 21 | 27 | 26 |
| Neurology..... | 34 | 44 | 53 |
| Psychiatry - 2 West..... | 9 | 21* | 16* |
| Alcohol & Chemical Add... | 2 | | |
| Neurosurgery..... | 29 | 6 | ---- |
| Obstetrics delivered..... | 1 | ---- | ---- |

*2 West and 2 South, separate statistics not kept

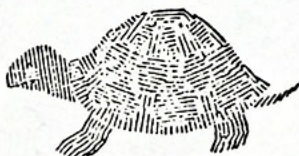
Average length of stay... 4.4 d. 4.6 d. 4.2 d.

The Nursing Staff was augmented by Jane Krystosek who was appointed maternal and child health clinician. She is a welcome addition to the Staff.

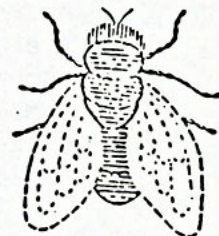
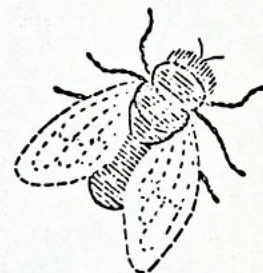
Group nursing replaced team nursing on the Pediatrics Unit. New ideas for recreational activity are being implemented with hospital volunteers working as play personnel.

The parent and adolescent lounges were redecorated and a television set was placed in the adolescent lounge.

Monthly inservice lectures by the Medical Staff are well attended by nursing personnel. A three-hour course for the public on child and infant care was given in conjunction with the Continuing Education Department.



Donald C. Heckman, M.D.
Chief of Pediatrics



DEPARTMENT OF PSYCHIATRY

1976 - 1977

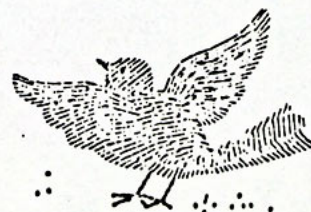
STATISTICAL INFORMATION

| <u>Inpatient Statistics</u> | <u>1976-77</u> | <u>1975-76</u> |
|---|----------------|----------------|
| Total number of patients admitted | 430 | 423 |
| Female. | 288 | 290 |
| Male. | 142 | 133 |
| Total number of adolescent patients (ages 13-18). . | 72 | 73 |
| Female. | 42 | 48 |
| Male. | 30 | 25 |
| Total number of children (under 13 years of age). . | 2 | 1 |
| Female. | 1 | 0 |
| Male. | 1 | 1 |
| Total number of patients over 65. | 41 | 42 |
| Number of patients readmitted | 148 (34%) | 114 (26%) |
| Number of patients given electroshock | 20 | 20 |
| Number of patients transferred to Day Treatment Program. . | 4 | 15 |
| Number of patients transferred to State hospitals . | 10 | 10 |
| Average daily census on the Mental Health Unit. . . | 31.4 | 28.7 |
| Average length of stay. | 25.6 d. | 24.3 d. |
| Number of patients from outside MHC* catchment area | 139 | 105 |
| Number of patients from out-of-state. | 6 | 2 |
| Adolescent average length of stay | 35.5 d. | 29.7 d. |
| Adolescent readmission rate | 13 (18%) | 18 (24%) |

*Central Minnesota Mental Health Center 4 County area

Primary responsibility for the emergency phone service was transferred to the Mental Health Center in January of 1977. The number of calls on our emergency phone since that time has been minimal.

The total number of staff persons currently involved in the program on 2 West amounts to 47 employees, and this does not include the services of the Department of Occupational Therapy, Recreational Therapy, Social Services, Psychology and the teacher who comes during the school year to assist with teenagers' educational programs.



Staff additions during the year were:



July, 1976 - Dr. James A. Willie

June, 1977 - Dr. James Collins, Ph.D., psychologist, began working with patients on the Mental Health Unit.

June, 1977 - Jean Laudenbach, OTR, appointed Program Director for the Mental Health Unit.

New additions to the Mental Health Program in the fiscal year of 1977:

- (a) The Satellite Unit was opened in January, 1977, for the purpose of having extra beds where patients could be taken care of while they are in the process of making discharge plans. There are rather strict guidelines concerning admission to this Unit, and the patients are integrated into the program of 2 West activities and therapy.
- (b) The Occupational Therapy Department offered a sensory motor exercise, evaluation, and therapy which included movement therapy and task groups for individuals needing this kind of help. The OT Department also provided work evaluations and activity of daily living programs.
- (c) A special group was started for the more severely disturbed psychotic patients as an individual type of program within the entire structure of the unit.
- (d) There was also a program for adolescents, including individual groups for the adolescents and a behavior modification program in which the teen-agers earn privileges.
- (e) There was a creative video group for adolescents during the summer recess from schoolwork.
- (f) The Quality Assurance Program which was initiated this Spring revealed the Mental Health Unit to remain in the 94-96% range of excellence in care provided.

Staff development included:

- (a) Weekly Inservice Sessions, September through June.
- (b) Monthly all-staff meetings.
- (c) Annual Spring all-staff workshop for one-half day.
- (d) Special instructors included:
 - (1) Tom and Judy Wright from the Adlerian Association, Minneapolis, who spoke twice once on "Value Clarification and Assertiveness"



and another time on "Who Cares for the Caretaker? - How to Prevent Professional Burn-Out."

- (2) Edie Raether from Green Bay, Wisconsin, who was here two times on "Psychodrama and Role-playing," once for a workshop for MHU and A&C staff and again for MHU staff and patients.

(e) Dr. Willie spoke on lithium therapy.

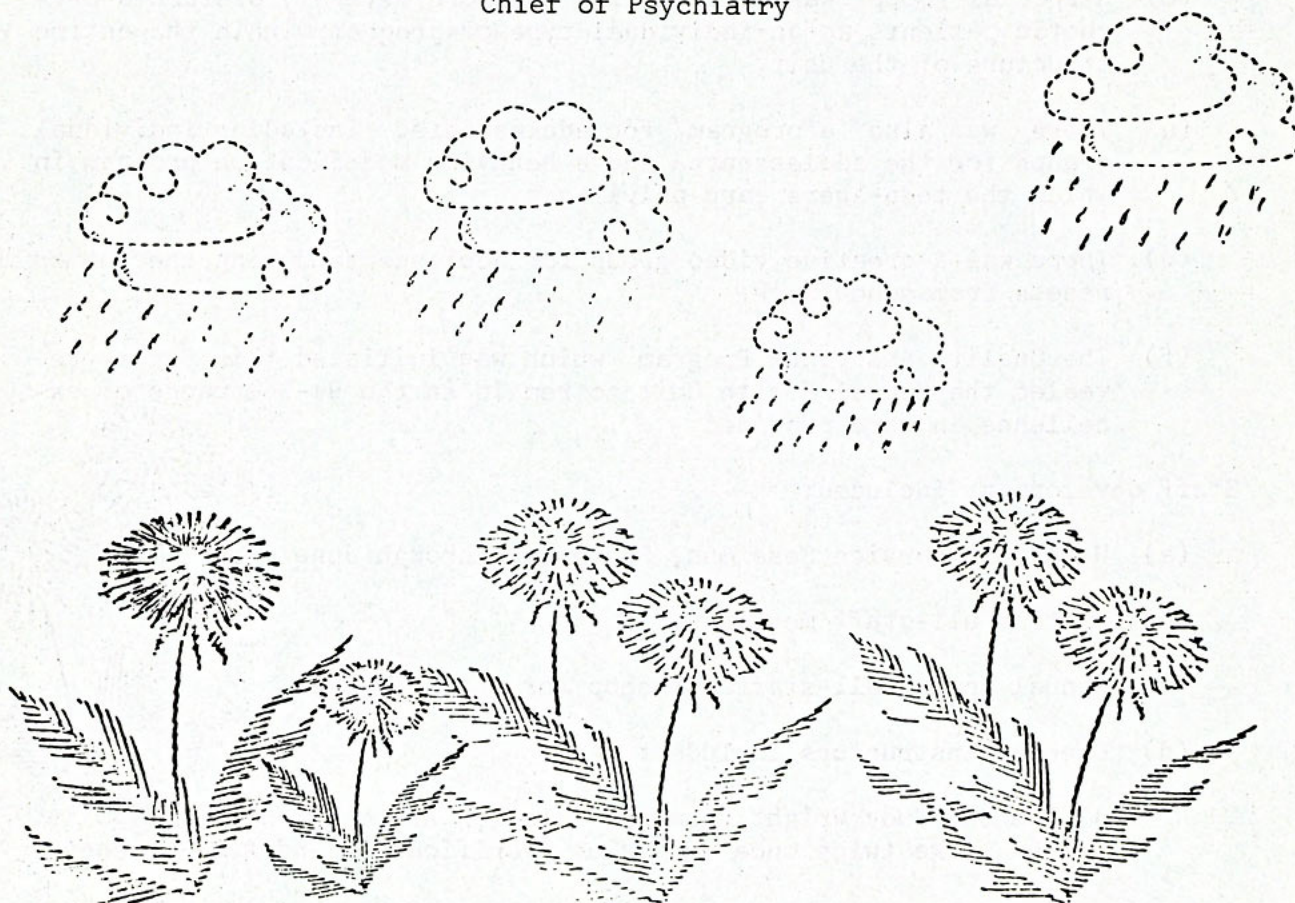
The Christmas Open House was held again this year and was a huge success. Approximately 1,007 persons visited.

Plans are being made for expansion as soon as space is available, so that the satellite beds can be moved closer to the Mental Health Unit.

The Chief for the Department of Psychiatry for the coming year is to be Dr. Henry Brattensborg. Objectives for the coming year include more structured relaxation therapy, more specific therapies for the more disturbed psychotic patients, adding to and strengthening the patients' education program, and to further staff development through inservice and continuing education.

Paul L. Warner

Paul Warner, M.D.
Chief of Psychiatry



DEPARTMENT OF RADIOLOGY

1976 - 1977

| <u>ACTIVITY</u> | <u>1976-1977</u> | <u>1975-1976</u> |
|--------------------------------------|------------------|------------------|
| Fluoroscopic examinations | 4,781 | 6,118 |
| Other radiographic examinations | 42,453 | 42,118 |
| Special procedures: Vascular | 600 | 499 |
| Myelogram | 86 | 85 |
| Arthrograph | 184 | 116 |
| Xeroradiography (mammography) | 402 | 438 |
| Nuclear medicine: Radioisotope scans | 1,916 | 1,971 |
| I-131 and P-32 therapy | 26 | 22 |
| Ultrasonography | 189 | 0 |
| Cobalt, deep and superficial therapy | 5,829 | 3,823 |
| Radium implant | 10 | 0 |
| Total | 56,476 | 55,190 |

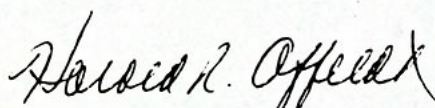
Statistics covering work performed during the past year indicate an increase in total activity, as projected, with marked increase in radiation therapy and in special procedure examinations.

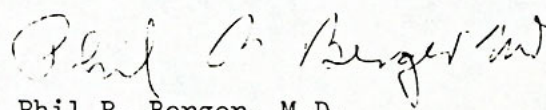
Ultrasonography equipment has been on site and operational since January, 1977, and the instrumentation for Echocardiography was added in June, 1977.

Certificate of Need for the purchase of the Computerized Tomography Scanner was approved this past year and purchase should occur prior to November, 1977. The CT Scanner should be operational late in 1978, depending on renovation of available space and delivery of the equipment.

The Technical Staff continues to pursue an intensified quality control program, implemented in 1972, with some minor changes in format occurring each year. Random sampling of all examinations provides information that can measure the level of quality of patient care. Monitoring of film processors is performed daily, along with scheduled maintenance, to insure optimal processing results, and provide information for necessary corrective action. The documented results indicates a high percentage of success in this program.

The School of Radiologic Technology received accreditation from the Joint Review Committee on Medical Education (AMA-ASRT), after an on-site evaluation of our training program by the survey team of that committee in October, 1976. Seven students completed their training in August, 1976, and all were successful in passing their National Registry examinations. Eight students were accepted into the training program beginning September, 1976.


Harold R. Affeldt, R.T.
Director of Radiology


Phil R. Berger, M.D.
Chief of Radiology

DEPARTMENT OF SURGERY

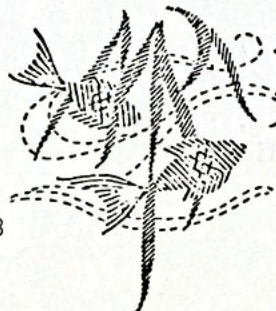
1976 - 1977

The Department of Surgery again enjoyed a good year. The actual number of general surgical procedures performed during the fiscal year was relatively the same as in the previous year with totals of 2,371 in 1976 and 2,360 in 1977. A slight decrease in the total number of in-patients undergoing surgery was compensated for by the increase in out-patient general surgery. An interesting facet of surgery at the present time is the increase in the number of patients who are being admitted shortly before surgery and then remain in the hospital for their post-operative care. Also, a larger number of patients are coming in for surgery with general anesthesia, having their procedure done and are being discharged from the Emergency-Outpatient Department when they have recovered enough to go home. When this is feasible it helps to decrease the cost of hospitalization and also, many patients are happy because they need to spend so little time in the hospital.

The Department of Surgery presented three forums. One was a presentation on acute appendicitis at St. Cloud Hospital. This forum was well received because of the use of local statistics, which were compared with national and international statistics. Other forums were on medical and surgical management of inflammatory bowel disease, and the care of colostomy, ileostomy and urostomy stomas by outside personnel. It was generally felt that these forums were quite informative and of eminent help to the physicians in their care of patients.

Departmental meetings were generally well attended. There is a movement on at the moment to revise the current method of delineating surgical privileges. This is a rather thorny subject and a subcommittee is working on it. New books were recommended for purchase by the library. A number of policies were worked out for the Intensive Care Unit. Also, new policies were worked out for the surgical consent forms. All of the procedure trays maintained in Central Supply were reviewed by the Department of Surgery and additions, revisions, and deletions were recommended. Hopefully this will decrease costs and also the number of trays so that everything that is available is used. Also, during the meetings charts for deaths in the department were reviewed.

Several audits were carried out by the Department of Surgery during the past year. There is an on-going tissue audit on appendectomy with special attention being paid to the number of perforated appendices found at surgery. In addition, all instances of surgical removal of normal tissue are reviewed. An audit on partial and total thyroidectomy is in process. Hopefully some information will be obtained in relationship to the problem of cold nodules. An audit on cholecystectomy was finished during this fiscal year and appropriate recommendations made regarding the results. An audit on benign breast mass was completed. No corrective action was required.



In summary the last fiscal year was a good year for the Department of Surgery. The Department will endeavor to continue its programs to further the education of not only the surgeons but also the other physicians on the Medical Staff. We have enjoyed working with the personnel in the Operating Room and will endeavor to continue our good relationships with these personnel and to assist them in any way that is necessary to maintain the excellent conditions in the Operating Room.

B.R. Bancroft
Burton R. Bancroft, M.D.
Chief of Surgery



SUMMARY OF STATISTICS ON SURGICAL PROCEDURES
1976 - 1977

| Procedures In the O.R. | Inpatients | | Outpatients | | Total | |
|---|------------|------|-------------|------|-------|------|
| | 1977 | 1976 | 1977 | 1976 | 1977 | 1976 |
| General Surgery | 2256 | 2275 | 104 | 96 | 2360 | 2371 |
| Gynecology | 840 | 820 | - | 7 | 840 | 827 |
| Urology | 605 | 678 | 25 | 23 | 630 | 701 |
| Observation cystoscopy | 425 | 339 | 162 | 118 | 587 | 457 |
| Orthopedics | 1091 | 1075 | 79 | 87 | 1170 | 1162 |
| Ophthalmology | 479 | 467 | 44 | 39 | 523 | 506 |
| Ear, Nose, Throat | 590 | 672 | 46 | 89 | 636 | 761 |
| Obstetrics | 401 | 315 | - | 1 | 401 | 316 |
| Neurosurgery | 165 | 93 | 5 | 4 | 170 | 97 |
| Dental Surgery | 32 | 56 | - | 0 | 32 | 56 |
| Organ Donations | 3 | | - | | 3 | |
| Total | 6887 | 6790 | 465 | 464 | 7352 | 7254 |
| In the Emergency-Outpatient Department (scheduled) | | | | | | |
| Proctoscopy | 1354 | 1524 | 287 | 353 | 1641 | 1877 |
| Other endoscopy | 245 | 218 | 41 | 23 | 286 | 241 |
| Miscellaneous surgery | 627 | 402 | 238 | 345 | 865 | 747 |
| Total | 2226 | 2144 | 566 | 721 | 2792 | 2865 |
| In the Nursery | | | | | | |
| Circumcision | 881 | 833 | 0 | 0 | 881 | 833 |



DEPARTMENT OF UROLOGY

1976 - 1977

Statistics show a small increase in the number of patients but a decrease of more than 300 inpatient days. Therefore the average stay for both adults and children is shorter. The increase in consultations given indicates the need for urologic consultation for patients admitted primarily for other pathology.

| | This Year 1976 - 1977 | Last Year 1975 - 1976 |
|------------------------|---|---|
| <u>Adults</u> | 1124 patients 7668 days 6.8 days average stay 464 consultations asked 590 consultations given | 1110 patients 7993 days 7.2 days average stay 474 consultations asked 529 consultations given |
| <u>Children</u> | 119 patients 356 days 3.0 days average stay 25 consultations asked 17 consultations given | 114 patients 367 days 3.2 days average stay 23 consultations asked 21 consultations given |
| <u>All patients</u> | | |
| Cystoscopy only | 425 inpatients 162 outpatients | 339 inpatients 118 outpatients |
| Other urologic surgery | 605 inpatients 25 outpatients | 678 inpatients 23 outpatients |

The Departments of Urology, Nursing Service and Continuing Education worked together with the result that the whole hospital took a major step forward in caring for patients who need use of a urethral catheter. On 5 North, of course, catheter care is always a major concern in postoperative care of urologic patients. For other patients in the hospital use of a catheter might be considered incidental to the major thrust of their care. Nevertheless, a catheter is always a potential source of infection. About 40% of the hospital's nosocomial infections are catheter-related.

A definite program of catheter care for hospital-wide use was initiated by the Department of Urology and strongly supported by the Department of Nursing Service. The Continuing Education Department devoted an entire week to inservice sessions for all nursing personnel. Because of this experience nursing personnel throughout the hospital are more knowledgeable about urologic procedures and they are trained in standardized methods of catheter care. It is gratifying to know that the Department of Urology played a significant part in this program for better patient care.

The urologists again take this opportunity to express their appreciation to nursing and other hospital personnel for working with us in our care of patients.



Patrick B. Kavaney MD
Patrick B. Kavaney, M.D.
Chief of Urology



ACCOUNTING DEPARTMENT

1976 - 1977

1976-77 was a fairly routine year for the Accounting Department. No new computer systems were installed and no drastic changes were made to existing systems. Microfiche and microfilm have eliminated much of the paper record storage we experienced in the past.

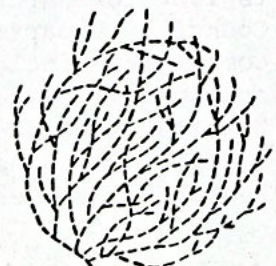
The Accounts Payable section of Accounting with internal controls and the aid of the computer was able to capture cash discounts of \$24,349.75 during 1976-77. This is a satisfying statistic since the primary function of Accounts Payable is paying hospital liabilities.

In addition to paying all hospital liabilities, Accounts Payable is responsible for depositing to the banks all hospital funds received and handling all transfers between banks and bank accounts. Accounts Payable classifies all expenditures as to type and department and maintains this record, bills and collects all non-patient charges including nursing student loans, maintains depreciation records on hospital equipment and is also responsible for controlling and sorting paychecks and distributing AIDS slips. The hospital petty cash fund is maintained by Accounts Payable.

Accounting prepares the monthly hospital financial statements for administration and monthly department and unit statements. The annual audits by the hospital auditors, Medicare, and Blue Cross are supervised by Accounting. Medicare and Blue Cross cost reports are prepared by Accounting as is the material for Minnesota rate review. Full cost reports, data for comparisons with other hospitals, and some statistical reports and comparisons are prepared. Accounting also assists the departments and units in preparing their annual budget proposals and assembles the proposals into the total hospital budget. During the year reports are prepared comparing actual data with the approved budget for the year.

In the coming year a new computer will be installed which will affect the internal operation of the Accounting Department. We anticipate being able to achieve a delayed objective of computer preparation of some reports. We also anticipate serving the hospital as we have in the past to the best of our abilities.

Ron Spanier
Director of Accounting



ADMINISTRATIVE OFFICE SERVICES

1976 - 1977

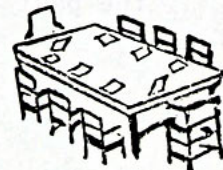


Last year in our report to you we gave you an overview of the Administrative Office Services organizational structure and the work we perform in the Department, keeping in mind the over-all objective, "To respond to the needs of the Executive Vice President, Associate Administrator, six Assistant Administrators, Administrative Resident, and departments, as assigned, for secretarial, clerical, postal, duplicating/copying and filing services as efficiently as possible, at the lowest possible cost, keeping in mind our Christian commitment to excellence.

Because statistics and documentation are the rule of thumb today, and with staffing and the annual report in mind, we maintained a record of some of our tasks. We think it is rather interesting that we answered the telephone approximately 1,915 times a month for a total of 22,980 calls during the year. In connection with the telephone we wrote 565 messages/month for a total of 6,780 and placed 480 calls/month for a total of 5,760. PDR luncheon tickets in the amount of 972 were issued. 3,145 meetings were scheduled in general hospital meeting rooms; 1,767 incident reports were processed.

167 trips were arranged for personnel who were attending out-of-hospital meetings and workshops. Even with the new procedure inaugurated in May, 1976, in which our department copies/duplicates only those materials requiring 50 or less copies, 976,209 copies were made on the xerox machines. 52 issues of the "Little Beacon" were edited in the department; the typing, duplication and distribution of 260 issues of "Today" and 52 issues of the "News Bulletin" took place here.

Secretarial services were made available for transcription of letters and memos; for typing of policies, procedures, articles, programs, forms, financial statements, budgets; for shredding confidential material; for compilation of the monthly employee birthday list and sending out cards daily; and for serving as recording secretaries to Board of Trustee committees, the Administrative Council, Department Head meetings, and a host of hospital committees including Education, Emergency Medical Care Coordinating, Safety, Personnel Advisory, Personnel Policy, Picnic, National Hospital Week, Pension, Legislative Action and Planning, the Services and Facilities Planning Advisory Committee, and St. Cloud Hospital-Central Minnesota Mental Health Center Liaison Committee. We counted a total of 173 meetings.

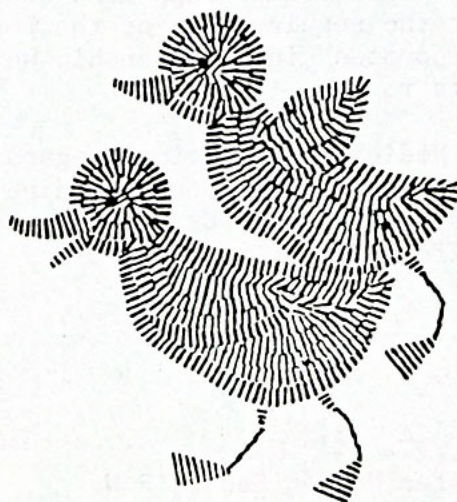


New responsibilities assigned to our department are distribution of payroll checks every other Friday and the following Monday morning, and mailing the checks not picked up by 12:30 p.m. The Postal Service delivers paycheck stubs for employees on the Automatic Individual Deposit System (AIDS) each Friday morning. We are also keeping a file and record of insurance beneficiaries for personnel who travel on hospital business.

It has been an interesting and rewarding year. We look forward to the challenges of the new year, keeping in mind that through providing secretarial, mailing, messenger, duplicating/copying and centralized filing services, we are responding to the health care apostolate in a positive manner.

Agnes K. Moeglein
Agnes K. Moeglein

Director of Administrative Office Services



ADMISSIONS DEPARTMENT

1976 - 1977

During the fiscal year 1976-77 the Admissions Department showed a slight increase in activity in terms of the number of patients registered. The total number of inpatients (19,097) admitted was a decrease of 51 compared with 1975-76. The outpatient registration, however, increased by 425 compared with 1975-76. The total increase this year is 374. The total number of patients registered is 43,353.

The greatest number of inpatients including newborn on any one day occurred on April 21, 1977, when there were 484 patients. The all-time high the previous year was on February 17, 1976, when there were 482 patients. The largest number of inpatients admitted on one day was 98. That same day 69 outpatients were registered. The largest total number of patients registered in one day was 192; of this total 87 were inpatients and 105 were outpatients.

There seems to be an increase in "new" patients--those who register here for the first time. Although we have never compared this statistic with previous years, the 10,588 new patients this year seems an unusually high number.

A trend that we see developing is an increase in the number of patients entering the hospital through the Emergency-Outpatient Department for a surgical procedure to be followed by inpatient admission instead of being admitted as an inpatient the afternoon before surgery. This is an important reason for the decrease in patient days from the previous year.

The utilization review portion of the Quality Assurance Program of St. Cloud Hospital continues to operate satisfactorily and smoothly. A total of 5700 patients were reviewed. We are still awaiting notification of our membership with the Metropolitan Foundation for Health Care Evaluation which is to be the Professional Services Review Organization for our region. Our Utilization Review Coordinators have regularly attended the F.H.C.E. Coordinator meetings and we have attempted to modify our program to meet the requirements of the Foundation. At the time we are finally incorporated into membership we should not have a great number of adjustments to make.

On January 1, 1977, Medicare regulations regarding denial of hospital benefits to patients after they do not require an acute level of care became much more stringent. The Utilization Review Coordinators are appreciative of the efforts of the Medical Staff to make our review system an effective one.

Sister Marion Sauer
Sister Marion Sauer, R.N.
Director of Admissions

ALCOHOL AND CHEMICAL ADDICTION CENTER

1976 - 1977

The gradual growth of the Alcohol and Chemical Addiction Center is revealed by the record of patient days during the six years since our opening:

| | 1977-76 | 1975-76 | 1974-75 | 1973-74 | 1972-73 | 1971-72 |
|-----------|---------|---------|---------|---------|---------|---------|
| July | 820 | 880 | 812 | 380 | 305 | 232 |
| August | 872 | 626 | 866 | 455 | 368 | 291 |
| September | 872 | 811 | 816 | 586 | 378 | 259 |
| October | 916 | 896 | 609 | 483 | 420 | 341 |
| November | 954 | 738 | 729 | 478 | 274 | 246 |
| December | 795 | 755 | 856 | 730 | 297 | 258 |
| January | 955 | 779 | 902 | 667 | 413 | 414 |
| February | 904 | 857 | 750 | 611 | 411 | 482 |
| March | 985 | 967 | 682 | 912 | 587 | 386 |
| April | 920 | 683 | 751 | 841 | 439 | 353 |
| May | 1,008 | 804 | 771 | 904 | 571 | 349 |
| June | 962 | 722 | 828 | 828 | 534 | 261 |
| TOTAL | 10,963 | 9,518 | 9,372 | 7,875 | 4,997 | 3,872 |

During the year 1976-77, our unit served 372 patients. We have truly become a regional chemical dependency treatment center for Central Minnesota. The Minnesota counties and other states served this year are listed here:

| | | | | | |
|------------|-----|-----------|---|--------------|---|
| Stearns | 155 | Todd | 6 | Becker | 1 |
| Benton | 31 | McLeod | 6 | Big Stone | 1 |
| Crow Wing | 29 | Hennepin | 5 | Beltrami | 1 |
| Douglas | 26 | Ottertail | 3 | Pope | 1 |
| Morrison | 23 | Cass | 3 | Anoka | 1 |
| Stevens | 18 | Kandiyohi | 3 | Rhode Island | 1 |
| Wright | 17 | Swift | 2 | Georgia | 1 |
| Sherburne | 12 | Wilkin | 2 | Arkansas | 1 |
| Meeker | 10 | Ramsey | 1 | Idaho | 1 |
| Mille Lacs | 7 | Traverse | 1 | California | 1 |
| | | | | Michigan | 1 |

Of our 372 patients this year, 115 were females ranging in age from 13 to 70. 257 were men whose ages ranged from 14-76. These patients were admitted by 42 different physicians on our Medical Staff.

| | |
|--|------------|
| Total number of patients for detoxification only | 127 |
| Total number of patients completing treatment | 245 |
| | 372 |
| Average stay for detoxification | 3.8 days |
| Average stay for treatment | 46.2 days* |

*This includes weekend passes

The various diagnoses for patients on our unit are listed below.

| | | | |
|---------------------|-----|--------------------------|---|
| Alcoholism | 258 | Visual hallucinations | 1 |
| Chemical dependency | 101 | Hold for 2 West | 1 |
| Overdose | 6 | Drinking with disorderly | |
| Alcoholism with | | conduct | 1 |
| seizures | 1 | Gasoline sniffing | 1 |
| Chemical dependency | | | |
| evaluation | 1 | | |

Referrals to the Alcohol and Chemical Addiction Center came from the following sources:

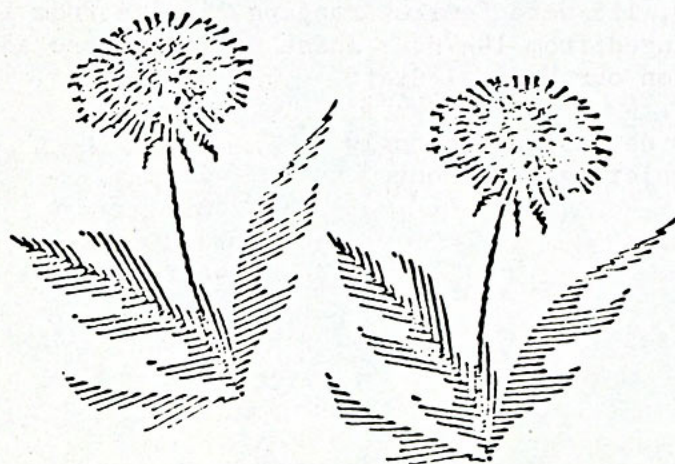
| | | | |
|-------------------------------|-----|------------------------|----|
| Alcohol counselor | 70 | AA members | 10 |
| Family | 116 | Transferred from other | |
| Self | 56 | hospitals | 7 |
| Quad County Receiving | | Friends | 5 |
| and Referral | 33 | Court | 5 |
| Transferred from other floors | 26 | Probation Officer | 3 |
| Emergency Room SCH | 25 | Social Worker | 1 |
| Police | 13 | School counselor | 1 |
| | | Employer | 1 |

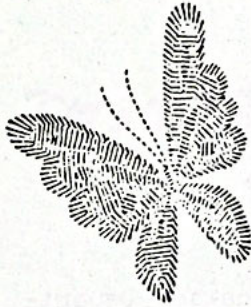
After treatment our patients were referred to the following persons, agencies and places:

| | | | |
|-------------------------|-----|----------------------------|---|
| Home | 217 | Crow Wing County follow-up | 4 |
| Home AMA | 58 | Jail | 3 |
| Presently in treatment | 31 | Detox Center | 2 |
| Halfway Houses | 21 | Court | 1 |
| Other treatment centers | 18 | Staff discharge | 1 |
| Other floors of SCH | 14 | Foster home | 1 |
| | | Mental Health Center | 1 |

We want to take this opportunity to thank each member of our nursing and counseling staff for the excellent work they are doing. Special thanks are due Dr. Vernon E. Neils, chairman of the A&C committee for his concern and many hours of extra service.

Paul S. Kurtz
Paul S. Kurtz
Program Director





BUSINESS OFFICE



1976 - 1977

Business Office personnel have the duty of collecting payment for services received by patients from all of the departments in the hospital as well as from the personnel working here, so that the St. Cloud Hospital may continue to give these services to the many who come for them.

During the fiscal year the Business Office collected \$19,958,000. This was accomplished by increased efforts to collect from patients at the time of discharge and increased pressure on all third party payers who are billed for 70% of the accounts. We have also streamlined our collection procedures regarding outpatient accounts.

We continue to hold a meeting every week to keep all employees informed about new policies and procedures. This gives each employee in the office an opportunity to ask questions and to make suggestions.

Our greatest amount of contact with the patient and his family is at the time of discharge, although we continue to work closely with the Social Service Department on patients referred to their office for possible financial assistance. We also obtain insurance coverage information on the patient and assist him in setting up a plan for payment of the balance of his account or obtaining assistance from a Welfare Agency when necessary. Patients are assisted with budget counseling or obtaining a loan if necessary.

At the time of discharge we can be of great service to the patient by our courtesy in answering the many questions they have about their bills and by filling out their insurance forms so that they are able to collect their benefits from insurance companies. We assist patients in completing claim forms when they are unable to do so themselves. When the patient leaves our office, he knows how the bill is being handled and what we expect of him.

Jill Hagemeyer, Secretary of CMMS, was promoted to Senior Office Cashier.

Accounts Payable, Data Processing and Pharmacy departments are now making use of the microfilm camera and viewer which are located in the Business Office.

Although it is less gratifying to take than to give, we believe that the Business Office can be of great service to our fellowmen by courteous, efficient and proper methods of collecting patients' accounts. This continues to be our goal. If we accomplish it, the St. Cloud Hospital will be able to continue to give service.

Wayne R. Lauermann
Business Office Manager

CONTINUING EDUCATION DEPARTMENT

1976 - 1977

1976-77 has seen a few staff changes in the Continuing Education Department. Carolyn Andrews was Acting Director of Continuing Education for the year. The accomplishments mentioned in this report are due to the abilities and direction of Carolyn who recently moved to Remer, Minnesota. Sally Grabuski returned from an education leave of absence in June, 1977.

In an effort to meet the numerous education needs of St. Cloud Hospital's diversified departments and employees, we have attempted to work closely with the appropriate division and department managers. Jeanette Carlson has continued to work with the Medical Support Services Division. Linda Wallen works with the Nursing Division. In October, 1976, Konie Slipy left the St. Cloud Hospital. Jim Painter was hired to work in her place with the Rehabilitation and Counseling Services Division. These Education Coordinators have been able to meet the identified needs for specific educational experiences.

Ruth Mueller, Secretary, and Phil Schneider, Media Coordinator, continued to add their expertise for the improvement of our department and the hospital. Jerry Schmitz served as a media intern for one college quarter. Mark Krauel worked with Phil during November.

Nancy Campbell and Pat Kasimor have skillfully developed the Health Science Library and the Kiwanis Patients' Library respectively.

Many hours of volunteer service have helped this Department to become better organized. Joan Hicks and Judy Heeter volunteer in the Kiwanis Patients' Library. Elizabeth Buscher and Laurena Ryan volunteered in the Health Science Library. Corrine Janochoski and Mari Winkelman volunteered in the secretarial area.

We want to thank all of these able, dedicated, and serving women and men who have given of themselves over the past year.

This year we have been very active in employee, patient and community education. The following are our major activities accomplished during 1976-77:

PRE-SERVICE AND ORIENTATION PROGRAMS

We continue to present the day-to-day educational activities of the Department, such as orientation for new employees, affiliating students, faculty and volunteers; orientation of new managers; orientation of all Nursing Service employees; and Nursing Arts Class for X-Ray students.

ON-THE-JOB TRAINING

Various skill training classes and numerous special workshops were presented during the year. Examples of these classes and workshops are

I.V. Certification for RN's; CPR Review for all appropriate hospital employees, and Time Management for Secretaries and their Managers. The new addition of the mobile video system enables us to take skill training and education programs to the evening and night personnel.

CONTINUING EDUCATION PROGRAMS

Examples of education programs presented to St. Cloud Hospital employees on their own time include: Nursing and the Law, Conflict Resolution, Caring for the Caretakers, Sensory Integrative Dysfunction, Weight Control, and Poison Control. The Department has also been assisting AHEC with workshops and classes for area health professionals and lay persons. Employees continue to take advantage of college courses offered at the St. Cloud Hospital during the year such as Anatomy & Physiology, Pathophysiology, Cultural Anthropology, and Crisis Interviewing.

PATIENT EDUCATION PROGRAMS

The Continuing Education Department has acted as a coordinator for patient education programs at St. Cloud Hospital utilizing the expertise of our employees as the instructors. We continue to coordinate the active social groups for patients with diabetes and ostomates.

Attendance at the Prepared Childbirth Classes has more than doubled during this year. More than 580 couples participated in the 6 week sessions.

Infant Care Classes, new this year, were favorably received.

The Stroke Support Group is also new this year and has received good response from stroke victims in the community.

Patient Education Programs in Pre- and Postoperative Instruction, Cancer Education, and a Cardiac Support Group are being planned for the next year.

COMMUNITY EDUCATION PROGRAMS

Community Education Programs sky-rocketed. We presented an average of 11 evening programs a month to approximately 5,500 people in the community. Our programs included the Heimlich Maneuver, CPR Demonstrations, and Poison control.

KIWANIS PATIENTS' LIBRARY

A \$600 donation from the St. Cloud Kiwanis Club was used to increase the large-print book collection for our patients and to establish a book cassette collection for children under the age of 8 in the Pediatrics Unit. This Library also became more involved with providing talking books and the talking book radio to patients who are visually impaired.

HEALTH SCIENCE LIBRARY

Utilization of the Health Science Library increased again this past year. The Librarian's hours were extended from 4 to 6 hours per day in response

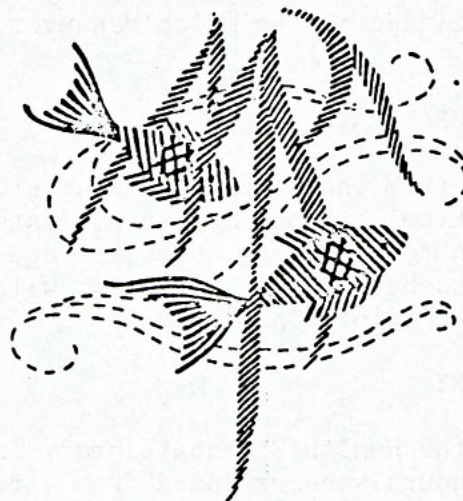
to the higher usage. Working with the Continuing Education & Library Committee and the ELMER Committee, the Library initiated an extensive collection-building program. The audio-visual software (video cassettes, films, etc.) was moved to the Health Science Library. This is the first step in developing a Learning Resource Center for St. Cloud Hospital.

The Continuing Education Department looks forward to the challenges of Management Training, of expanded Patient and Community Education Programs, and of opening appropriate educational programs to area health personnel in 1977-78.

In many ways 1976-77 has been a very educational year. Again, I'd like to thank the outstanding Continuing Education staff for the above-mentioned educational efforts and accomplishments. Another "thank you" goes to all the employees who participated in our education programs to improve their performance for the benefit of our patients.

Sally J. Grabuski

Sally Grabuski
Director of Continuing Education



DATA PROCESSING DEPARTMENT

1976 - 1977

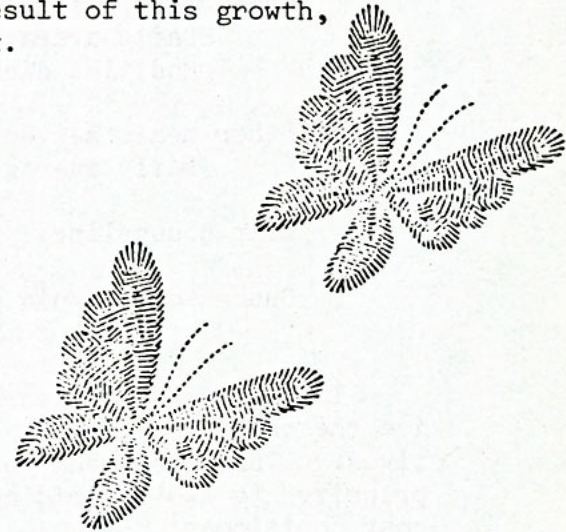
In December of 1969 the Saint Cloud Hospital installed its first digital computer for batch processing. This system, the Burroughs B-2500 medium scale computer, has been used for processing a large portion of the detailed financial records of the hospital. In recent months it has been used more and more extensively in processing patient information relating to Rehabilitation, Pharmacy, and Laboratory records. Rapid growth has taken place and as a result of this growth, the need for more storage capacity became apparent.

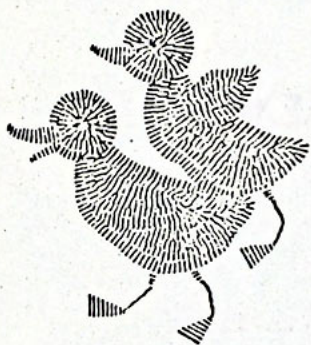
After receiving approval for a more capable computer system, the Department has placed effort on evaluating some of the systems available throughout the industry. Using a test program developed at Saint Cloud Hospital, we have learned that the newer technology has made computers with greater processing power available at a cost of nearly 50% less than the cost of our original B-2500 system. Cost of disc storage and computer memory has decreased nearly 75% compared with the prices of several years ago.

The selection of a newer system will be made in the early months of fiscal 1977-78 with conversion to the system taking place during that fiscal year. After our library of nearly 250 programs is converted, effort will be directed to allowing more on-line accessibility to our existing information. This will result in better communication of information for accounting, billing, payroll and laboratory. An added benefit may well be the elimination of some of the large volumes of paper currently required. More rapid access to all information currently being processed will be our long-range goal and a good portion of this will become a reality by fiscal 1978-79.

Terry Heinen

Terry Heinen
Data Processing Manager





DIETARY DEPARTMENT

1976 - 1977

| | <u>This Year</u> | <u>Last Year</u> |
|----------------------------|------------------|------------------|
| Total meals served | 706,072 | 670,798 |
| Daily average | 1,934 | 1,833 |
| Meals served to patients | 370,207 | 379,169 |
| Daily average | 1,014 | 1,036 |
| Modified diet percentage | 32.6% | 33.7% |
| Other meals served | 335,865 | 291,629 |
| Daily average | 920 | 797 |
| Diet counseling | 2,051 | 1,916 |
| Ounces of Formula prepared | 38,745 | 22,319 |

In reviewing the yearly statistics listed above it is difficult to visualize the creative teamwork with which the dietary department has met its objectives. Throughout the year the supervisors have coached themselves to give priority to two overriding concerns: Improvement in the quality of care and cost containment.

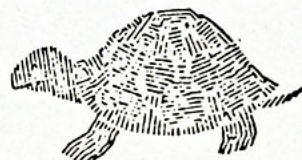
PATIENT SERVICES

The response of patients to the revised Exchange Lists for Meal Planning has been extremely gratifying. These attractive booklets prepared by a committee of the American Diabetic Association and the American Dietetic Association in cooperation with several health specialty groups have been amended by the staff dietitians for use not only in counseling patients with diabetes but also for those with additional complications. Several leaflets on normal nutrition were approved by the Education Committee for distribution as appropriate to patients. There is an increase in the availability of well prepared nutrition education information and with careful screening, the use of these booklets decreases the time needed to prepare supplementary diet counseling material.

A newsletter to physicians, Dietary News and Views, was initiated in January. It is being used as a vehicle for communication of approved changes in dietary treatment.

ADMINISTRATIVE SERVICES

The reevaluation of the job descriptions begun last year was completed. The organization structure was revised, redefining the scope and responsibilities of supervisors and eliminating one supportive job category. These changes will be implemented by September, 1977.



A method of forecasting food production needs is being tested. A side benefit of the project is increased accuracy in portion control and reporting of leftovers.

Employee representatives assisted in revising the guidelines for vacation scheduling. Similar participation is planned to revise the guidelines for part-time scheduling.

OUTREACH

The dietitian assigned to the Pediatrics Unit assisted in planning and taught the nutrition section of the first hospital-sponsored Infant Care course.

There has been a forty per cent increase in referrals for outpatient diet counseling this year. The move to charge for outpatient counseling in 15 minute segments has made the charges more equitable for patients. Secondly, the dietitians find it has made them budget their counseling time more closely and stimulated their search for more effective teaching techniques.

About 75 meals were prepared each weekday for Home Delivered Meals.

Dietitians are providing consultant services for two more nursing homes. Particularly gratifying to these dietitians is the growth and development shown by the facilities' food service supervisors, the improved rating in state health department inspections and the slow but observable improvement in food quality, sanitation and interdepartmental relations.

EDUCATION AND STAFF DEVELOPMENT

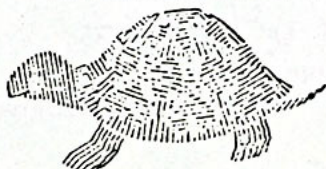
Supervisors rotated in presenting helpful information on supervisory skills. Regular employee inservice programs included body mechanics, relaxation techniques, weight control, safety and sanitation and several programs on diet modification.

Six students completed the second year in the Area D Preplanned Dietetic Traineeship. Five passed the national examination to become registered dietitians. Six new trainees began their rotation in area institutions last September.

Included in the workshops attended by dietitians were several on nutritional assessment and audit of nutritional care. During the coming year, emphasis will be placed on developing criteria for dietary care for specific diseases which can be incorporated into multidisciplinary audits.

PLANS FOR THE FUTURE

Projected are plans to refine the criteria for quality control checks relating to food service and sanitation so that more employees can perform the evaluations. There will be increased involvement of employees in the twin concerns of quality care and cost containment. We hope to take part in some hospital-sponsored nutrition education programs for the community.



Mary Jane Schoffman
(Mrs.) Mary Jane Schoffman, R.D.
Director of Dietetics

ECG AND EEG DEPARTMENT

| | <u>1976 - 77</u> | <u>1975 - 76</u> | <u>1974 - 75</u> |
|------------------------------------|------------------|------------------|------------------|
| Electrocardiograms, inpatients | 9,156 | 9,181 | 7,987 |
| Electrocardiograms, outpatients | 620 | 554 | 575 |
| ECG exercise tests | 187 | 154 | 132 |
| Holter recorder and scans | 136 | 136 | 88 |
| Pacemaker registry | 58 | N/A | N/A |
| Total | <u>10,157</u> | <u>10,025</u> | <u>8,782</u> |
| | | | |
| Electroencephalograms, inpatients | 684 | 688 | 600 |
| Electroencephalograms, outpatients | 320 | 355 | 315 |
| | <u>1,004</u> | <u>1,043</u> | <u>915</u> |

The fiscal year 1976-1977 has been a year of equipment updating and expansion. The Holter monitoring equipment has been updated to give the patients of St. Cloud Hospital the most efficient scanning service available. Two new lightweight Holter recorders were purchased which makes the procedure more comfortable.

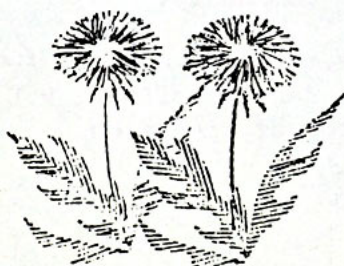
The Electrocardiogram Department is active in the shared services program, doing Holter scanning for East Range Clinic, Virginia, Minnesota; St. Joseph's Hospital, Brainerd, Minnesota; Ely-Bloomanson Community Hospital, Ely, Minnesota. Continued expansion and active marketing of the service are expected for the next fiscal year.

The Electrocardiogram Department added a new diagnostic service to benefit pacemaker patients. Pacemaker patients who participate in the program will have their pacemakers checked periodically over the telephone. Currently there are 20 patients enrolled in the program.

Electrocardiograms are being interpreted by the following Internists: Dr. J. H. Kelly, Dr. T. H. Luby, Dr. P. T. Moran, Dr. R. L. Thienes, Dr. H. E. Windschitl, Dr. J. J. Ballantine, Dr. R. W. Burmaster, Dr. W. L. Lindquist, Dr. D. L. Hanson, Dr. M. A. Stiles, and other internists designated by them on a monthly basis. The high month for electrocardiogram activities was March, 1977, when 1,013 procedures were performed.

Electroencephalograms are interpreted by the Minneapolis Neurological Clinic on Monday, Tuesday and Thursday. The Electroencephalogram Laboratory operates Monday through Friday from 8:00 a.m. to 4:30 p.m.

Dr. James H. Kelly has been designated Chief Supervisor and Dr. Jerome J. Ballantine Vice Chief Supervisor for the Electrocardiogram Department. With their assistance, the Electrocardiogram Department will continue to provide excellent diagnostic testing.



Michael J. Patton

Michael Patton, Director
Electrocardiography and Electroencephalography

EMPLOYMENT DEPARTMENT

1976 - 1977

"It is the policy of the Saint Cloud Hospital to grant equal employment opportunity to all qualified persons without regard to race, color, sex, handicap, age, religion or national origin. It is the intent and desire of the hospital that equal opportunity will be provided in employment, promotion, wages, benefits and all other privileges, terms and conditions of employment." "The Employment Department and the Department Head.....share the.....responsibility for the employment of qualified workers."

The above quotation is Saint Cloud Hospital's Employment Policy No. 100 as stated in our Supervisors Manual of Personnel Policies & Procedures. The Employment Department's reason for being is to support and assist all departments in implementing this policy. We are here to be "helpers." We help Department Heads find qualified candidates for each unique work situation. We help qualified applicants find work opportunities by carefully following policies and procedures developed to help us assure equal opportunities. We help all employees at all levels by interpreting personnel policies and explaining employment procedures. We assist with the proper paper work when employees change status whether it be returning to employment after an approved leave of absence or working out a transfer and/or promotion within our institution.

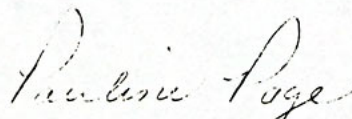
When we do our work well we are hardly noticed, but when we have problems handling our workload or filling positions we are noticed!

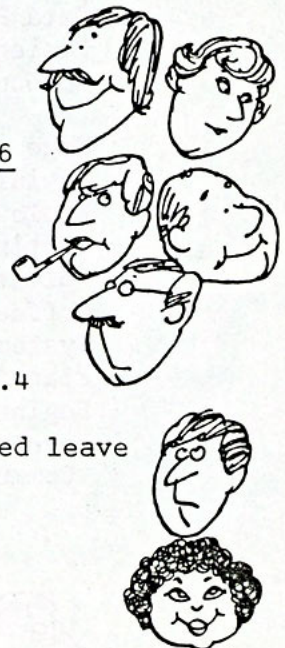
Our activities increase year after year as the hospital family grows and government regulations increase. Yes, government regulations touch even the Employment Department! As our activities and responsibilities increase our goal remains constant--implementation of the employment policies of Saint Cloud Hospital.

Again we say we are here to help you. Please call on us.

Our annual statistics are:

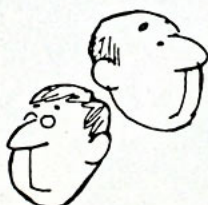
| | <u>1976-77</u> | <u>1975-76</u> |
|--|----------------|----------------|
| Applications received | 2,339 | 2,305 |
| Number of people hired | 395 | 370 |
| Exit and LOA interviews | 260 | 236 |
| Number of resignations | 354 | 320 |
| Number of approved LOA's handled | 155 | 175 |
| Employment turnover rate | 21.6 | 22.4 |
| Active employees | 1,459 | 1,437 |
| (does not include approximately 80 employees on approved leave of absence) | | |


Pauline Page
Employment Manager





| DEPARTMENTAL PERSONNEL 1976 - 1977 | Full Time | Part Time | Full Time Equivalent |
|--|--------------|--------------|-------------------------|
| Executive Vice President | 1 | Ø | 1.0 |
| Associate Administrator | 1 | Ø | 1.0 |
| Director of Continuing Medical Education | 1 | Ø | 1.0 |
| Assistant Administrators | 6 | Ø | 6.0 |
| Nursing Service | 276 | 331 | 438.3 |
| Surgery | 23 | 16 | 31.8 |
| Admissions | 7 | 12 | 15.1 |
| Anesthesiology | 19 | 5 | 22.8 |
| Housekeeping | 56 | 52 | 75.1 |
| Pharmacy | 12 | 2 | 13.2 |
| School of Nursing | 18 | 7 | 24.3 |
| Laboratories | 33 | 17 | 46.4 |
| Radiology | 21 | 16 | 28.6 |
| Medical Records | 17 | 13 | 24.6 |
| Dietary | 66 | 52 | 90.5 |
| Emergency-Outpatient | 10 | 20 | 22.6 |
| Rehabilitative Center | 33 | 16 | 41.2 |
| Mental Health Program | 22 | 21 | 33.3 |
| Alcoholism Treatment Program | 17 | 13 | 24.4 |
| Social Services | 5 | Ø | 5.0 |
| Psychology Services | 1 | Ø | 1.0 |
| Spiritual Care | 5 | 2 | 6.0 |
| ECG-EEG | 5 | 2 | 5.9 |
| Business Office | 18 | 6 | 22.5 |
| Centralized Purchasing & Materials Management | 45 | 23 | 60.6 |
| Data Processing | 7 | 4 | 8.7 |
| Patient Representative | 1 | Ø | 1.0 |
| Accounting | 6 | Ø | 6.0 |
| Wage and Benefits | 6 | Ø | 6.0 |
| Administrative Office Services | 6 | 2 | 7.3 |
| Employment Department | 4 | Ø | 4.0 |
| Continuing Education | 6 | 2 | 7.1 |
| Volunteer | 2 | 1 | 3.0 |
| Coffee Shop | 1 | 7 | 4.1 |
| Systems Design | 2 | Ø | 2.0 |
| Planning and Shared Services | 1 | Ø | 1.0 |
| Engineering | 29 | 5 | 33.4 |
| Development and Community Relations | 6 | 15 | 15.3 |
| | 797 | 662 | 1,138.2 |



CENTRAL PURCHASING AND MATERIALS MANAGEMENT

1976 - 1977

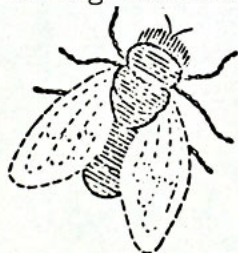
In the beginning of this fiscal year several changes in the Materials Management Department took place. These changes were initiated to better coordinate all the functions in the hospital relating to supplies, their acquisition, handling, processing and distribution. A new position, "Inventory Control Manager," was filled by Michael Nierenhausen. His position as Central Service Supervisor was filled by Kenneth Gerads. A part-time secretarial position in Central Service was added and filled by Betty Meyer. A Printer's Assistant position was added to the Print Shop staff.

Automatic Purchase Order Printouts System was implemented during the fiscal year of 1976-77. By setting the reorder points and economic order quantities for stock supplies, we were able to reduce the dollar value of the inventory by \$83,000. During the same period, the inactive stock dollar value was reduced by \$11,000. Our stock turnover rate for the same period has increased from 5.32 to 7.68. In April of 1977, we combined all separate reports into one Materials Management Monthly Report, adding data from the Print Shop and revising other departmental information, thus simplifying utilization for the next annual report, budget process and administrative information.

Our goal for the fiscal year 1977-78 is to implement inventory control, charge recovery, and centralized distribution of supplies to several nursing units and the surgery department with the exchange cart system. Presently nursing units and departments receive supplies of the same category from Central Service and Storeroom. Hopefully, with input from the units we can centralize and dispense supplies from the storeroom on a daily basis. The already accomplished reduction of inventory and inactive stock in storeroom has permitted a consolidation of supplies and a rearrangement of the storeroom to facilitate the exchange cart system operation from the storeroom.

The Laundry department processed 1,819,713 pounds of laundry that included 345,447 sheets and 13,837 pounds of laundry for the Detox Center. Air conditioning was installed in the Laundry, using some existing equipment, for approximately \$17,000. This has improved the employee morale and working conditions 100%. An additional dryer and a new lint collector were installed. One of the three 400-pound, 12-year-old, Troy washers was replaced with a 450-pound Milnor washer and an additional one is planned for the 1977-78 fiscal year. This year we will remove two old steam presses to make room for a small piece towel and gown folder. The new wash machines and small piece folder should result in reduced washing and folding hours.

During the fiscal year Central Service processed and sterilized 289,778 items, dispensed 34,423 parenteral solutions, processed 1,481 gallons of unsterile distilled water, applied 29,222 warm pack treatments and dispensed 209,406 patient care items. The decontamination equipment for the processing area is here and is being installed. Hopefully, it will be completed during the next fiscal year.



Maynard Lommel

Maynard Lommel
Director of Centralized Materials Management Department

MEDICAL RECORDS DEPARTMENT

1976 - 1977

Medical audit remains an activity that demands major effort and activity in the Medical Record Department. Reams are written about auditing--just trying to keep up with the literature is a challenge. Selection of a subject for audit is a major hurdle; after that, progression seems good. Audits have been completed by the clinical departments and several hospital departments. Now attention is being focused on doing multi-unit audit. In all this the Medical Record Department is playing the part of assistant with many hats--exponent, teacher, data-collector, display editor and archivist!

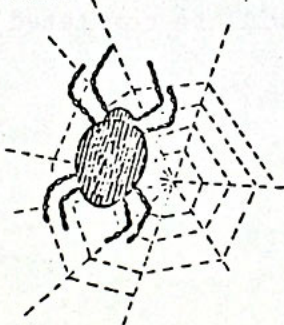
Compilation of statistics on occupancy has become more sophisticated. Reports are being made that show occupancy by clinical groups as well as on each nursing unit. Additions were made to the Report on Professional Work to include more departments.

Reorganization of Medical Record Department staff resulted in creation of the position of Supervisor of Transcription and Correspondence. We are now planning an 11 p.m. to 7 a.m. shift for transcription in an attempt to get histories dictated late in the day on patients' charts by early next morning. |

Eight employees attended a two-day institute at Methodist Hospital in St. Louis Park on various disease entities. The speakers were physician specialists practicing in the Twin Cities. The institute was sponsored by the Minnesota Medical Record Association. Record department employees also attended inservices given by SCH physicians for nursing personnel. Several employees attended a workshop on the Christian apostolate aspect of health care sponsored by the Minnesota Conference of Catholic Health Care Agencies. The department head attended the annual meeting and workshop of the Minnesota Medical Record Association and a workshop on cost containment and legal aspects of medical records given in San Antonio, Texas, by the American Medical Record Association.

Much administration time has been spent on writing policies for release of information from medical records. New statutes on privacy of information make medical record information both more and less accessible than formerly and comprehensive policies are a necessity.

Next year? Medical auditing will continue. Requests for information from charts will probably double. The department hopes to institute a self-audit of its procedures in addition to the many cross checks on our accuracy that we have now. The procedure book needs revision. We will continue to answer the multitudes of questions that indicate that our department should have Information Service somewhere in its title.



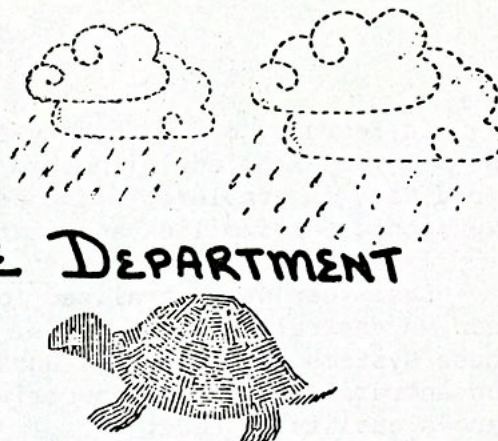
Sister Mary Schneider

Sister Mary Schneider, O.S.B., R.R.A.
Director of Medical Record Services



NURSING SERVICE DEPARTMENT

1976 - 1977



The year 1976-77 was full of activities that spoke to quality for our Nursing Service Department. We have continued with our audit process to evaluate the outcome of nursing care given. Our Quality Control Checklist was revised and upgraded through committee activity and with this method we are able to document the process of care. A patient interview regarding care is included and this is seen as a valuable means to aid us in upgrading our care. Inservice programs are developed based on areas that indicate need for improvement.

The revision in orientation program for new RN's stresses leadership skills and work out of a simulated lab. We see this as a means to help the new graduate bridge the gap between student and the realities that face one in a new position.

The requirements regarding documentation of care increase yearly. Emphasis is on development of chart forms that will gather pertinent data and reduce time spent in charting. Our Nursing Admission and Discharge sheets along with the Flow Sheets are means currently in use to achieve the needed results.

Our Policy and Procedure Manuals are now updated and on all units. These again are seen as tools the nurse can use to aid her so that appropriate policies and procedures relating to care are followed. The committee working on these consists of all levels of nursing staff in order to provide up-to-date and realistic policies.

As the complexities of intravenous therapy increased, we saw a need to add the position of IV Therapy Coordinator this Spring. Through this position one objective is to upgrade and monitor our standards for IV Therapy.

Our Head Nurses and Clinicians continue to attend the clinical department meetings and thus input from nurses and doctors is shared to improve patient care. I attended a Medical Staff Executive Committee meeting to relate what Nursing is here at the Saint Cloud Hospital and to stress the need for continued emphasis on doctor-nurse communication in order to achieve the highest level of care possible for our patients.

We continue to work with the three nursing education programs using our clinical facility in order to coordinate student experiences. Our involvement in short and long range planning continues to speak to quality and cost control. Our patient teaching programs, nursing care plans, assessment classes and all of our Continuing Education programs speak to ways and means to deliver quality care.

Our monitoring capabilities in the Intensive Care Unit increased with the addition of Swan Gans monitoring. This enables us to measure cardiac output and general fluid balance of the patient.

In February our Maternity services expanded to allow husbands in the Delivery Room and with this new policy our concept of Family Centered Care is complete. The addition has proved to be a satisfactory experience for families and staff.

Last year we centralized our staff scheduling process and this year we centralized time cards. By removing the responsibility for these systems from the Head Nurse and Transcriber, both are able to concentrate on their respective roles more fully and again this enhances quality of care.

Next year we will look at Primary Nursing Care as one area for expansion. In this concept the patient is assigned a nurse who has responsibility for nursing care from the time of admission until discharge.

By January we hope to have all job descriptions in the Department reviewed, revised and updated. Another emphasis will be to work on expanding the communication process for our Department.



We will be evaluating the Unit Dose System, 10-hour day concept, computerized scheduling and will continue evaluating the need for acute care beds. Our Skilled Nursing Unit (3 NW) will be closed when St. Benedict's Center opens and plans are already underway to make this process go smoothly.

The credit for achieving a high quality of care for our patients must go to all levels of staff in our Department. Through their individual and collective efforts we truly have a team that expresses caring.

I'm proud to be associated with this special group of people and ask God's blessings on them always.



Mrs. Connie Moline
(Mrs.) Connie Moline, R.N.
Director of Nursing Service

OPERATING ROOM

1976 - 1977

The 1976-77 fiscal year has been another interesting, full year. There was a deliberate plan to involve operating room personnel in the various responsibilities and activities of the suite. Serious participation was evident during the objective-setting workshop conducted in February. As a result of this meeting, operating room personnel developed department objectives for the 1977-78 fiscal year.

After a study-analysis of the block scheduling procedure and the hours of surgery performed by each surgeon, it was necessary to convert some of the open rooms to reserved rooms since they were used minimally. More operating time was designated to surgeons who require more hours. This means that most of the time available for surgery is now reserved time.

The capital equipment and instrument inventory was increased significantly for all surgery clinical departments. Included are the Saab image intensifier, the Weck eye microscope, two AMSCO operating tables, electrocautery machines, a Frigitronic cataract probe, orthopedic oscillator, reciprocating saws, etc.

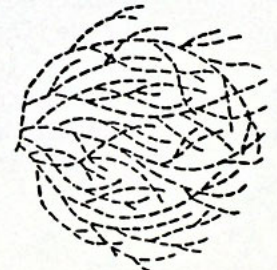
In March the St. Cloud Area Vocational-Technical Institute initiated an Operating Room Technician Program. Four students began their clinical experience in May. The rotations will continue through the summer. We are glad that the program is off the ground and already has the markings of success.

Very little turnover has taken place among the operating room personnel the past year. An 11 a.m. to 7:30 p.m. shift was begun to help cover the late afternoon procedures. Patient transportation service was extended to 7 p.m. daily and to Saturdays.

The inservice and continuing education conferences have been designed to keep all informed, updated, and aware of their respective roles. An especially beneficial conference was given by a member of the Kidney Transplant Team from the University of Minnesota Hospital.

O.R. personnel continue to give excellent service. They always manifest a special commitment to the care of the patient needing surgery. A hearty "thank you" and much appreciation is extended to all who serve the sick in the Operating Rooms.

Sister Mary Ellen
Sister Mary Ellen Machtemes, R.N.
Operating Room Supervisor



PHARMACY DEPARTMENT

1976 - 1977



1977 was a typical year for the Pharmacy Department. Activities measured by the department showed a 2% increase over fiscal 1976-77 in spite of decreased patient days. Again the productivity of the department was slightly in excess of 100% indicating adequate personnel coverage for our present activities.

The past year was spent primarily in upgrading our service to the patients in the hospital and following are some of the ways in which we tried to improve:

The controlled substance system was totally implemented when the system was extended to the E-OP Department, thus streamlining their record keeping and giving the hospital proper control.

Surveillance of controlled substances on the nursing units was increased during the year with daily visits by Pharmacy to the floors, assisting in the elimination of errors and shortages.

Reduction in floor stock on the nursing units was accomplished through the cooperative efforts of Nursing Service and the Pharmacy by limiting the availability of medications on the floors.

Efforts have been made to upgrade the computerized patient medication profile during the year with the addition of allergy information which shows on the CRT during the processing of orders and on the hard copy of the profile used by the Nursing Unit and the Pharmacy for reordering medications. Narcotics are also entered into the Pharmacy profile even though these items are not ordered directly from the Pharmacy for the patient, thus making the medication profile more accurate.

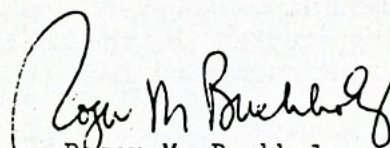
In an effort to have the Pharmacy get all of the information written by the physician on the Doctor's Order and Treatment Form, a new form was developed and approved. The new order form will be available shortly for use on all of the floors and will insure that all of the information written will be available in the Pharmacy for more accurate medication profiles. Studies indicated that the Pharmacy received only about 70% of the information on the older form.

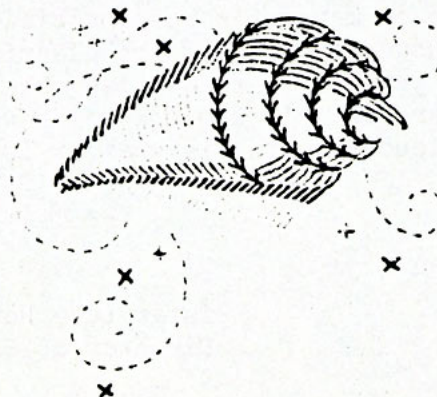
Significant time savings have been realized from the implementation and use throughout the whole hospital of the IV Medication Profile for reordering of IV additives. In addition to the time savings both on the Nursing Unit and in the Pharmacy, the use of the profile is far more accurate, as the information used to reorder IV's has been made from a pharmacist's interpretation of the physician's order.

Additional IV Additive service improvements were made when the Pharmacy began dispensing TPN (Total Parenteral Nutrition) solutions in plastic bags, eliminating spillage on the nursing units and the consequent mess. The totally closed system (no air vent), which is the result of using plastic bags, further eliminates the possibility of a contamination of these important infusions. A new order form for the TPN solutions was developed and is in use throughout the hospital for the ordering of TPN. The order form helps to standardize the physician's ways of ordering and eliminates confusion in the Pharmacy and on the units, insuring far more accurate medication preparation for the patient.

The Unit Dose Drug Distribution System trial ran into a snag during the past fiscal year and the trial scheduled for the last quarter of the fiscal year was not completed. However, much work was done in the Pharmacy and Nursing Service on this project and all feel confident that we will proceed in the coming fiscal year with a pilot program and partial implementation of this distribution system. Efforts of the Pharmacy and Nursing Service departments are being concentrated on realization of this goal.

The Pharmacy Staff looks forward with others to continued progress in the care of patients at the St. Cloud Hospital during the coming fiscal year and is more than willing to accept its role in the plan for accomplishing this objective.


Roger M. Buchholz
Chief Pharmacist



PLANNING DEPARTMENT

1976 - 1977

The fiscal year 1976-77 saw the Dynamic Planning Process introduced on a one-to-one basis with each department head. Excellent support was given by all division directors. I see the need, now, to continue to encourage department heads to utilize those parts of the St. Cloud Hospital planning process that will make their jobs as managers easier. Just as the NOW Program took time to implement, so, too, will this program grow familiar only with repeated use.

Priorities identified by the Services and Facilities Planning Advisory Committee have been and will continue to be addressed in the coming year. The issue receiving first priority, bed needs, comprises a significant portion of the hospital long range plan that is being developed. All departments cooperated significantly in the past year in identifying their short and long range needs. Pulling these all together into a total plan continues to be the challenge, but some good ground work has been done. Since no plan is static, there continues to be a need to make adjustments even as a plan is being developed.

At the department head retreat held in November, 1976, the hospital's objectives for 1977-78 were developed, using the St. Cloud Hospital planning process.

The Department of Planning supervised the study of home health services in the area. A recommendation was made as a result of this study, and accepted, that St. Cloud Hospital not duplicate already existing home health services within the community. However, some aspects of consumer/public education are currently being studied by the Continuing Education Department as a result of a recommendation coming from the Home Health study.

Requests for additional space are processed through this department. While not all requests can be met as requested, efforts are made to provide for the needs of all in the most efficient and effective manner. The Space Committee has been a valuable resource in carrying out this function.

With the resignation of Dale Stein, who was responsible for Shared Services, that task was assigned to this department. I have worked with, and received excellent cooperation from, department heads in the marketing of numerous services to area facilities.

While the Director of Planning has the visible title for doing that task, we know it is really each manager's responsibility to plan for his own area. Without that kind of understanding of the planning function, it would be impossible for any one person to accomplish the job. I am grateful that our management team is aware of this and takes its responsibility so seriously. Because of them St. Cloud Hospital is what it is today.

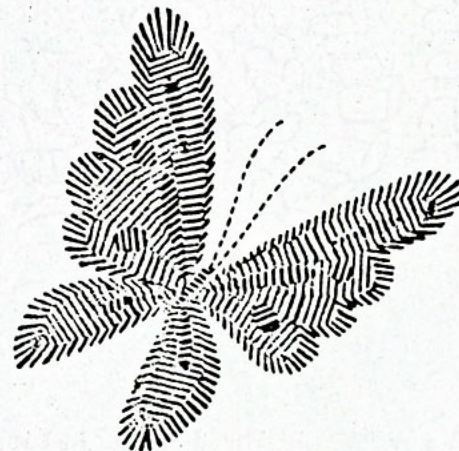


Sister Luke Hoschette, SSB
Sister Luke Hoschette
Director of Planning

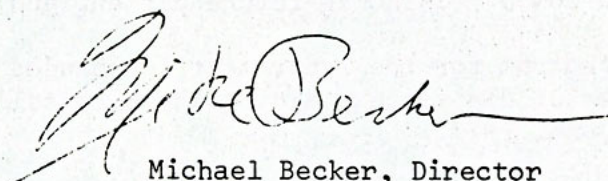
PSYCHOLOGY DEPARTMENT

1976 - 1977

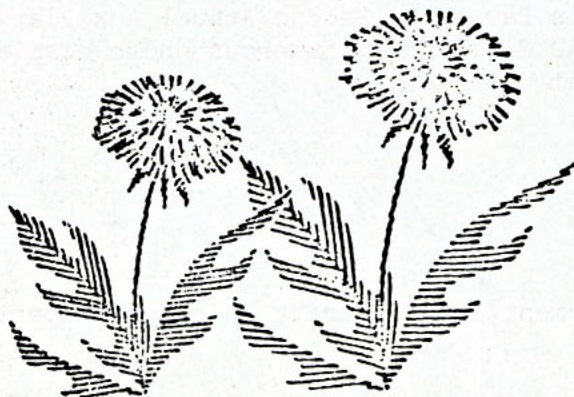
Psychology continues to operate by physician referral, working mainly on assessment and evaluation. We are responsible for referrals throughout the hospital. During the past fiscal year, 810 patient contacts were made with 40 per cent from medical floors, 16 per cent from the Mental Health Unit, 37 per cent from the Alcohol and Chemical Unit, and 7 per cent as outpatients.

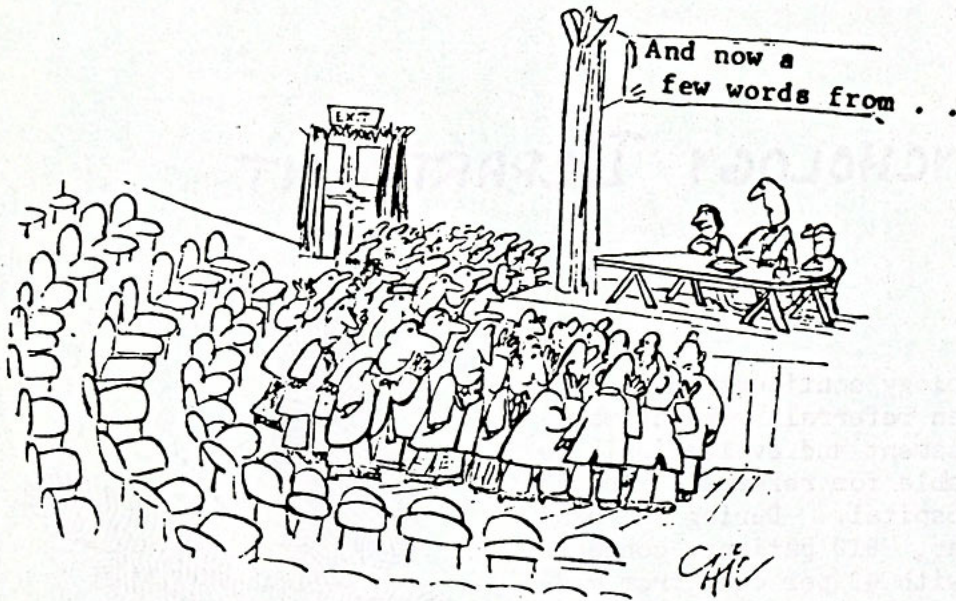


In February, Dr. Richard Enter resigned after spending three years at St. Cloud Hospital. We thank Dennis Andersen who has done an excellent job of filling in temporarily until a full-time replacement was obtained. A welcome is extended to Dr. Steven Vincent who joined the staff in July. We look forward to continuing this valuable service and anticipate a family relationship with physicians, nurses, and other staff.



Michael Becker, Director
Rehabilitation and Counseling Services





THE
DEVELOPMENT
AND
COMMUNITY
RELATIONS
DEPARTMENT
1976 - 1977

The Public Relations Department underwent some major changes during the past year. First, its role was expanded to include the development function; and second, its title was changed to reflect its new responsibilities. In September, 1976, the Public Relations Department became the Department of Development and Community Relations.

Basically the Department's goals have not changed. They were intensified and expanded to include fund development. So, a major objective for the Department became the formation of a program to expand the hospital's community relations activities and to identify alternative sources of financing future patient and community health needs.

A program for the Department's expanded efforts was approved and a series of dinners explaining the hospital's development program began in June, 1977.

Other departmental activities include maintaining the hospital's communications unit under the direction of Communications Supervisor Rita Johnson; the publication of the "Beacon Light," "Today," and the "Friday Bulletin"; the production of a slide/sound presentation on the hospital's sponsorship which is now being used during employee orientation; assisting with the coordination of National Hospital Week, Business-Education Day, the Second Annual Auxiliary Ball, the activities of the SCHLAP Committee; numerous photo displays; and serving as liaison with local news media.

Jeff L. Blair, Director
Development and Community Relations Department



REHABILITATION CENTER

1976 - 1977

The past year has seen many exciting things happen in the Rehabilitation Unit. In July we welcomed Gerald Carlson, Speech Pathologist, as a new hospital employee. He has served this hospital in a joint agreement with Easter Seals for the past six years. He now is an employee of the hospital and Chief of Speech Pathology Services. In September Respiratory Therapy was added to the Rehabilitation Unit and we welcomed Duane Murray and his crew to the new venture. The other happening was that Jean Laudenbach, Chief Occupational Therapist the past six years, was promoted to Department Head in charge of programs of the Mental Health Unit. We wish Jean the very best in her new job. We will miss her in our unit.

We are continuing with many of the special programs such as the physiatrist from Mayo Clinic in Rochester coming here for consultation once a month. The Amputee Clinic meets approximately every two months. The child and adult evaluation team is functioning and available when ordered by the physicians. Our services to area nursing homes continue as does our school program in the fourteen-county area.

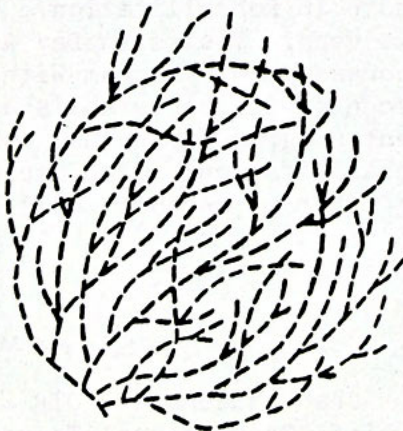
Treatment numbers continue to grow in most areas. They will be covered in the areas of physical therapy, occupational therapy, therapeutic recreation, speech pathology and respiratory therapy.

Many of our people serve as consultants, advisors and interested people on local boards such as United Cerebral Palsy, Parent Groups and others. We hope they will continue to do this as a cooperative venture with these important agencies.

We wish to express our thanks again to the Medical staff and Rehabilitation Committee for their continued support of our unit.



Earl E. Pederson
Rehabilitation Center Coordinator

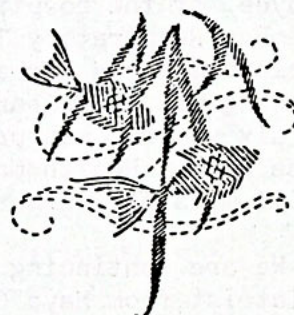


OCCUPATIONAL THERAPY

1976 - 1977

The Occupational Therapy Department has had an interesting year, offering a variety of treatment programs, and planning for the future. The Rehabilitation Occupational Therapy staff continues to provide service to the Cerebral Palsy Clinic, Rehabilitation Evaluations, Activities of Daily Living, Work Evaluations, consultation to nursing homes and Day Activity Centers, visually handicapped program, Sensory Integration Evaluations and treatment. They also maintain a functional and supportive Occupational Therapy program and provide splints, adaptive equipment and prosthetic training.

The Mental Health Clinic now serves 78 patients from 2 West and 2 South (10 beds added to 2 West this year). The program is very dynamic and includes activities, task groups, music and relaxation, work evaluations, activities of daily living, and sensory integrative testing and therapy.

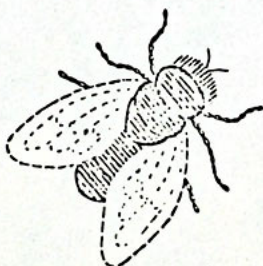


Therapists have participated in providing educational programs for hospital personnel, the community, and at universities which send us students. The Occupational Therapy staff has also attended a variety of workshops and in-services both within the hospital and outside the hospital to keep up with new theories and techniques in Occupational Therapy, Rehabilitation, Mental Health, and Chemical Dependency. Two therapists are now in the process of receiving their certification for Sensory Motor Evaluation.

We continue to work on chart audits and improving our quality control process. Other activities in the past year include planning for new Occupational Therapy space for Mental Health and Chemical Dependency, planning an Occupational Therapy Department for St. Benedict's Center and becoming involved with Occupational Therapy's role in Health Systems Agencies.

Treatment units in Occupational Therapy this year totalled 22,243.

Six volunteers offered much time and assistance in Occupational Therapy this year. Thirteen Occupational Therapy students trained in our hospital: 7 in the Mental Health Unit and 6 in Rehabilitation. We will be increasing the number of students next year. Visits to Day Activity Centers and nursing homes will also increase. A "Program Within a Program" for chemically dependent adolescents will be established. We are also planning to improve our treatment program for spinal cord injuries and examine the need for cardiac rehabilitation. The use of audio-visual aids in planning and assessing therapy methods will be initiated in the coming year.



Jean Laudendach, OTR
Jean Laudendach, OTR
Chief, Occupational Therapy

PHYSICAL THERAPY

1976 - 1977

During the past year we have had the opportunity to evaluate our efficiency and the quality of patient care. I feel that the outcome of our investigation has increased positive output in these two areas. Our modalities have increased by 5,000 over the count made last year on the 30th of June. Our quality of care index averages 99.5%. The average utilization index is 106% as of this date.

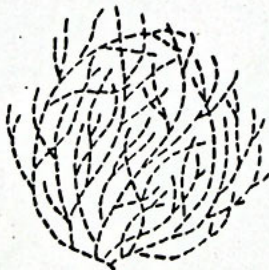
We are continuing our student affiliation program and presently have two students affiliating from the College of St. Scholastica. The student affiliation program continues to be beneficial to our department in that it challenges our personnel in new and sometimes forgotten areas.



Our extended services of consultation and direct treatment now includes Benton County Public Health Nursing Service, area school districts, Stearns County Day Activity Center, Westwood School, St. Joseph's Nursing Home, St. Cloud Manor Nursing Home, Mother of Mercy Nursing Home and Maddens Nursing Home in Kimball and South Haven. We have also been actively involved in the planning and supplying of equipment for St. Benedict's Center.

We have maintained our personnel Continuing Education program throughout the year. Our schedule has included other times for meeting of both professional and supportive personnel to discuss problems in any area and coming up with alternatives to these problems. Several of the workshops we have attended have proved very beneficial in that we are seeing better results for our long-term patients.

I have found this past year as Chief Physical Therapist to be a very challenging and educational experience for me. I can only foresee more progress and better quality patient services in the future.



Greg Campbell R.P.T.
Greg Campbell, R.P.T.
Chief Physical Therapist

RECREATION THERAPY

1976 - 1977

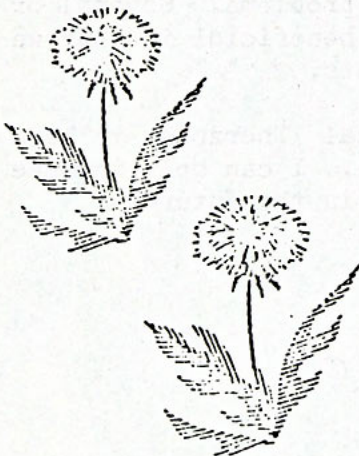
Since Recreational Therapy was not authorized to hire an additional therapist to assist in our extensive program, recreational services were cut on 2 NW, 3 NW, and 4 North. The staff concentrated on 2 South and 2 West, and had five hours a week for referrals.

However, during this past fiscal year, with fewer patients to serve we did have more time to assess patients' recreational backgrounds, functional abilities and development on a continuing basis through the use of our Leisure Counselling Program.

We did have more time to learn and use new procedures, practices and approaches. One example of this was the establishment of an activity-based group therapy for psychotic patients on 2 West.

Of great importance was the opportunity and time to foster interdisciplinary relationships and cooperative endeavors to help provide comprehensive services for the patients.

And finally, with fewer patients, we had more time to be accountable, to report and record observations and evaluations systematically.



Mary- Ellen West

Mary- Ellen West
Chief Recreational Therapy

RESPIRATORY THERAPY

1976 - 1977

In general, the Respiratory Therapy Department participated and worked in the following areas: We were commissioned to work on two Boards within the City of Saint Cloud. We established a cooperative arrangement with the Monticello-Big Lake Community Hospital for delivering health care services. The Department of Respiratory Therapy worked closely with the Saint Cloud Hospital school of Nursing. Thirty-eight student nurses spent time in the department. We participated in a continuing education program at the College of St. Benedict School of Nursing. We have also worked with the Saint Cloud Area Vocational School.

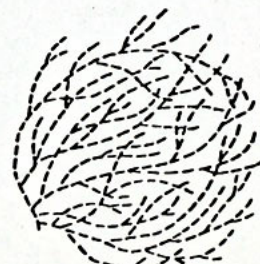
Under the direction of Dr. J. C. Belshe, the Pulmonary Function Laboratory has unfolded many new and interesting tests. We have had a growth in pulmonary function testing over the past year.

We have reviewed the respiratory therapy drugs for children and adults. We have also worked out unit dosage with pharmacy. The year 1977 has been exciting and productive.

Many thanks to the physicians, administrators, nurses, the Respiratory Care Committee and the staff of the Respiratory Therapy Department.

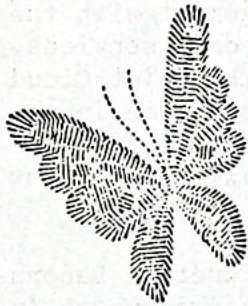
| <u>Modalities</u> | <u>Year Ending June - 1977</u> | <u>Year Ending June - 1976</u> |
|--|------------------------------------|------------------------------------|
| Intermittent positive pressure breathing, inpatient | 8,114 | 10,372 |
| outpatient | 143 8,257 | 346 10,718 |
| Postural drainage, inpatient | 2,664 | 2,482 |
| outpatient | 192 2,856 | 198 2,680 |
| Croupette with air | 129 | 1,092 |
| Croupette with oxygen | 55 | 295 |
| Continuous ventilation | 296 | 424 |
| Postanesthesia recovery IPPB | 234 | 216 |
| Ultrasonic nebulizer Rx | 6,940 | 8,707 |
| Ultrasonic on continuous | 2,364 | 2,571 |
| Oxygen with cannula | 3,303 | 4,130 |
| Oxygen with catheter | 108 | 141 |
| Arterial punctures | 1,515 | 1,190 |
| Pulmonary function tests | 126 | 6 |
| Oxygen humidity tent | 1,531 | 791 |
| Mistogens | 51 | 0 |
| Code Blue | 101 | 123 |
| Miscellaneous services | 75,362 | 46,826 |
| Total | 103,228 | 79,916 |

Duane Murray
Peace and Love
Duane Murray, Chief Respiratory Therapist



SPEECH AND LANGUAGE THERAPY

1976 - 1977



Speech Pathology Services functions to provide evaluation, diagnosis, treatment and consultation for speech and language handicapped individuals. It operates within the Department of Rehabilitation which is concerned with optimizing all functions of the chronically, permanently or developmentally handicapped. A Speech Pathologist is responsible for assessing a patient's total linguistic performance and capacity on an expressive, receptive and integrative level. With children, the Speech Pathologist designs and executes programs to elicit communication and develop adequate linguistic competence. With adults, skills must be reclaimed or compensatory strategies developed and refined for daily use.

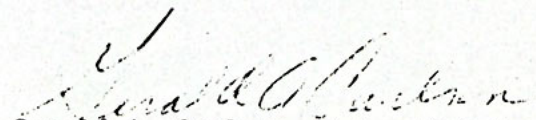
During the past fiscal year Speech Pathology Services has expanded its services to community and area facilities. Services are provided to five area hospitals other than St. Cloud Hospital, most area nursing homes, the Kimball Development Center, and the Waite Park and Cold Spring Day Activity Centers.

With the addition of a second Speech Pathologist who holds the Certificate of Clinical Competence in Speech Pathology, services have increased from approximately 300 therapy units per month in 1974-75 to 600 per month in 1975-76, to almost 700 per month for the past fiscal year.

Both Speech Pathologists feel that community education and involvement are important aspects of their responsibilities and they are, therefore, active in local boards, state organizations and teaching workshops.

Speech Pathology Services is involved in a quality of care review on a biweekly basis utilizing a 25 point questionnaire that assesses care in three areas: Patient factors, environmental factors and administrative factors.

Speech Pathology wishes to give credit and a special thank you to the St. Cloud Area Barbershop Quartet Association which has continued its support of our service this past year.


Gerald A. Carlson, M.A., C.C.C.
Chief, Speech Pathology Services



SCHOOL OF NURSING

1976 - 1977

MINNESOTA CONSORTIUM OF DIPLOMA PROGRAMS IN NURSING

This private, voluntary, non-profit organization comprised of the four remaining diploma programs in nursing in Minnesota was developed in the Spring of 1977. The chief purpose of the Consortium is to promote continued recognition of the hospital school of nursing as an integral part of the system of nursing education preparing for licensure of the registered nurse.

Functions of the Consortium are:

1. Represent diploma nursing education in the State of Minnesota
2. Seek ways and means of publicizing information that will interpret to the public the role of the diploma school in educating students of nursing
3. Foster recruitment programs by informing guidance counselors and prospective students of the values inherent in diploma nursing education
4. Mutually share methods of evaluating the effectiveness of the graduate of diploma schools of nursing and conduct valid studies in this area of concern
5. Participate in legislative activities which affect nursing education, nursing and health care
6. Provide a medium for the interchange of ideas among diploma educators
7. Evaluate the goals and accomplishments of the organization

STUDY OF CONTINUED NEED FOR DIPLOMA NURSING EDUCATION

In order to ascertain public perception of continued need for graduates of hospital-based diploma programs in nursing, a questionnaire was sent to 81 Minnesota hospitals designated in the "Nurse Shortage" category by the U.S. Department of Health, Education and Welfare.

Of the 63 respondents, 49 expressed a continued need for diploma nurses, 2 responded negatively, and 12 responses were ambivalent.

The numbers of the various categories of nurses currently employed in these hospitals (full time and part time) are as follows:

| | |
|-----------------------------|------|
| Licensed practical nurses | 1176 |
| Associate degree R.N.'s | 229 |
| Diploma R.N.'s | 1044 |
| Baccalaureate degree R.N.'s | 177 |

FACULTY

| <u>Faculty Turnover</u> | | |
|-------------------------|-------------------|---|
| <u>Leaving</u> | <u>Reason</u> | <u>Replacement</u> |
| One Masters prepared | Retirement | Masters prepared, returning from Sabbatical |
| One Bachelors prepared | Sabbatical | Bachelors in Nursing |
| One Bachelors prepared | Educational Leave | Bachelors in Nursing |

Continuing-Education

The Department of Diploma programs of the National League for Nursing requires that faculty members have Master's degrees in areas pertinent to the responsibilities of their positions, or have made plans to complete the required study.

In 1976 the national average in diploma programs for full-time faculty with Master's degrees was 26%. Of full-time faculty in our school for the 1976-77 school year, 47% had Master's degrees. The remainder have submitted written plans to complete the required study by September, 1980.

STUDENTS

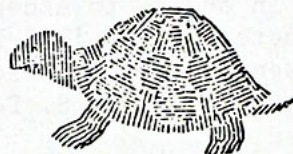
Graduates and their Employment

Seventy-three nurses were graduated on May 28, 1977. This number includes 8 men.

Graduates have, to date, done self job-placement and have encountered no difficulty in procuring suitable employment. Many received position offers from several institutions. The school also received numerous recruitment requests for graduates of our program.

One month after graduation the 1977 graduates were employed as follows:

- 22, St. Cloud Hospital
- 3, St. Cloud Veterans Administration Hospital
- 24, Rural hospitals and nursing homes in Minnesota
- 8, Minneapolis, Minnesota
- 6, Rochester, Minnesota
- 4, North Dakota
- 2, South Dakota
- 1, Iowa
- 2, Utah
- 1, Oregon



Enrollment

In the Fall of 1977 a total of 231 students will be enrolled in the program: 70 seniors, 81 juniors, and 80 freshmen. Of these, 17 will be career mobility students--licensed practical nurses admitted at the second-year level. Two transfer students are also being admitted.

There are 25 men enrolled. 23 students are in the 25 to 30 age group, and 12 are over 30 years of age. The career mobility students range in age between 21 and 52 on admission.

Study of Student Involvement in the Operation of the School

A questionnaire was devised, administered and tabulated. Findings indicated increasing interest and participation through responsible committee activity.

Curriculum Modification

1. The content of the former course in NURSING PROCESS was integrated throughout the curriculum, as recommended by the National League for Nursing in June, 1976. A three-week course in the Care of the Geriatric Patient was introduced in its place. This course comprises nine hours of didactic instruction and seventy-two hours of clinical experience.
2. Students are provided with further opportunity to enhance their skills in the care of the elderly person through a four-week Nursing Leadership experience in a long-term care facility.

To enable the school to implement this aspect of the program, clinical facility approval was requested and granted by the Minnesota Board of Nursing for use of the Monticello-Big Lake and Country Manor homes.

3. A nine-hour workshop of Assertiveness training was conducted for second-year students and faculty during March, 1977.

EQUIPMENT AND PHYSICAL IMPROVEMENTS

Two dozen armboard folding chairs were purchased to restore the original seating capacity in Classroom A to accommodate the entire complement of a class.

FINANCIAL ASSISTANCE TO THE SCHOOL

A Federal capitation grant of \$56,000 was awarded for support of the educational program. Eligibility again depended upon maintaining the expanded enrollment of 1972 admissions and reporting on two school projects during the 1976-1977 school year. The projects related to:

- a. Ten enrolled students from disadvantaged backgrounds
- b. Clinical training in long-term care facilities geographically remote from the main site of the teaching facilities of the school.

Summary of Financial Assistance to Students in 1976-77

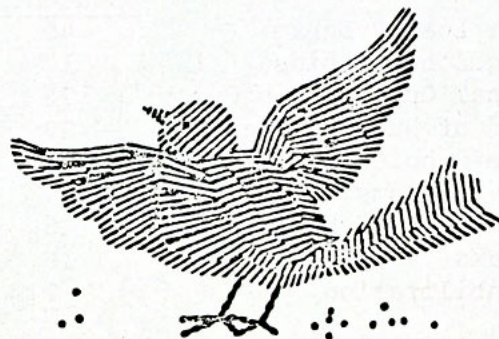
| | Number of Students | Total Amount Granted |
|---|-----------------------|-------------------------|
| Nursing Student Loan Program | 40 | \$47,165 |
| Federal Nursing Scholarships | 10 | 7,360 |
| Basic Educational Opportunity Grant | 72 | 64,601 |
| Minnesota Board of Nursing Grant | 22 | 8,825 |
| Minnesota State Scholarships and Grant-in-Aid Programs | 74 | 68,320 |
| Grace Weiss Halenbeck Scholarships | 5 | 1,000 |
| Veterans Programs | 16 | |
| Vocational Rehabilitation | 2 | 1,644 |

RECOMMENDATIONS

1. That the school engage a consultant for the study of our current statements of philosophy and school objectives to determine whether optimum compliance with R.N. 90, PHILOSOPHY AND GOALS, has been achieved.
2. The faculty recognizes the need for strengthening the area of Geriatric Nursing in the program. They recommend planning and implementing early exposure of students to the care of patients in a long-term care facility, St. Otto's Home in Little Falls.
3. That we continue to explore ways in which our students could be awarded college credits for nursing courses in the curriculum, and that we maintain current credits for supporting courses.
4. That the educational progression opportunities currently offered in our program be again evaluated by comparing the R.N. licensing examination scores and professional performance of our recent career mobility graduates with State Board scores and performance reports of their peer graduates of the generic program.
5. That study and evaluation of student involvement in the operation of the school be continued.
6. That Consortium-stated competencies expected of all graduates of Minnesota diploma programs be studied and adopted or revised as indicated.

Sister Mary Jude Meyer, O.S.B., R.N., M.S.

Sister Mary Jude Meyer, O.S.B., R.N., M.S.
Director, St. Cloud Hospital School of Nursing



SOCIAL SERVICE DEPARTMENT

1976 - 1977

During the previous year Social Services had the pleasure of adding a social worker. This has enabled Social Services to expand its areas of service as well as provide more comprehensive services. We now have a full-time social worker on 2 West and are also able to provide more coverage on the Alcohol and Chemical Addiction Unit.

Social Services averaged 283 referrals a month this past year. The average number of referrals per month on every floor in the last six months has increased due to our more comprehensive coverage.

Social Services still provides consultation services to several nursing homes in the area. This service is slowly expanding.




Social Services guided and counseled 146 patients and their families for nursing home placement and met with many others to arrange other services following discharge.

During the previous year 621 public health nursing referrals were received through the Social Services Department.

Social Services had one student from St. Benedict's College during February, March and April. This was a very positive experience for our department as well as for the student.

Social Services continues to provide hospital inservices as well as guest presentations for a variety of community organizations and classes.

We continue to be pleased by the friendly cooperation of all disciplines within the hospital. Our group expression of coordination and teamwork is a complementary experience for us as well as our patients.



Clayton L. Skretvedt

Clayton L. Skretvedt, ACSW
Director of Social Services

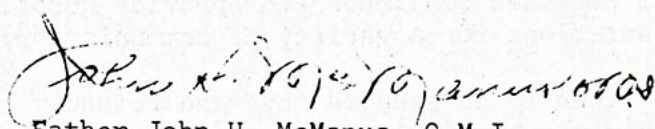
SPIRITUAL CARE DEPARTMENT

1976 - 1977

The Department of Spiritual Care functions within the hospital family and contributes to its vitality through the medium of the following personnel: The Department Head who is also full time Catholic Chaplain, one full time Protestant Chaplain (Lutheran), one full time Associate Chaplain (Sister), one part-time Catholic Chaplain, plus the sacristan, housekeeper, and part-time organist. Secretarial services are provided by the Department of Administrative Office Services.

The addition of a Neurosurgeon to the Medical Staff has given opportunity for members of this department to counsel and minister to families where there is suspected or actual cerebral death. Members of this department consult with the Medical Staff and members of Nursing Service in determining that the criteria necessary to diagnose cerebral death are present, a system which protects the rights and dignity of the patient, and gives emotional support to the family and staff.

During the coming year our efforts and thrust will be directed towards those values inherent in the philosophy of St. Cloud Hospital. Through lectures and workshops for information and education we will treat specifically the value of life, the meaning of suffering, grief and death, and finally, community.


Father John H. McManus, O.M.I.
Director, Department of Spiritual Care



SYSTEMS DESIGN DEPARTMENT

1976 - 1977

A great number of things were accomplished last year. A partial list is given below.

A. Routine Activities

1. We analyzed quality control reports every pay period. The designed procedure to summarize quarterly deficiencies seems to be working satisfactorily.
2. We analyzed incident reports every month. Some special studies about incident reports were also completed. Examples are meperidine/mepergan incident reports, falls on 6 South, and comparison of incidents on medical floors with previous years.

B. Nursing Service Projects

1. 6 South Staffing study was completed and recommendations were made about their staffing needs.
2. A similar study was completed on 6 North.
3. Better guidelines were designed for administering PETO program, enabling a better control.
4. Patient classification system was investigated. The conclusion was reached to retain the PETO concept. PETO program was designed for 6 North, 5 North and 2 North. The dry runs are being conducted now.

C. New Service

1. We undertook a forms management program on an ongoing basis. At the present time the emphasis is on the purchased forms. The effort has yielded a savings of more than \$12,000 a year. This should be a recurring saving. We designed a procedure for forms xeroxed often by nursing units. We also designed better team sheets for every floor.

D. Other Projects

1. A new system was designed to forecast dietary food requirement. The system has been very successful. It has a potential of eliminating the use of Menumatic and would save a few hours every day.
2. We provided help in analyzing the proposals for telephone system for St. Benedict's Center.
3. Surgery block scheduling study was updated.
4. South bank elevator study was completed resulting in better transportation of critical patients.
5. Paper flow study in the Business Office was completed. It resulted in material savings of \$6,130 a year and a reduction in manpower of 2,730 hours or approximately \$12,000 a year.

6. A cyclical schedule was designed for P.A.R.
7. We provided data for many small requests, e.g., O.R. on-call hours; Nursing Service supervisors in pharmacy; data for unit dose evaluation; Respiratory Therapy schedule; Wage and Benefits Blue Shield-Blue Cross study; and paper flow in Accounting Department.
8. We improved our budget projection methodology. We are projecting activities for long-range planning, too. A paper on this subject titled "Activity Projection Methodology" will be presented at a forum by the Center for Hospital Management Engineers affiliated with the American Hospital Association in Atlanta in October, 1977.

E. Shared Services

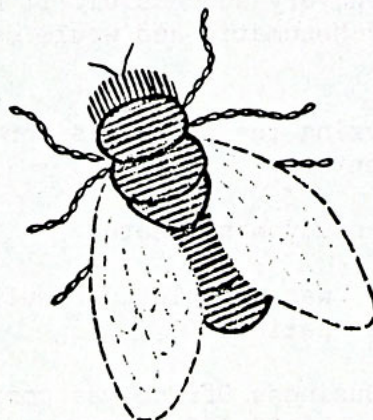
1. A staffing study was done for St. Benedict's Center and a staffing pattern was developed.

F. Projects Underway

1. Physical Therapy Department staffing
2. Archives storage area need
3. Computerized schedule to staff nursing units
4. Biomedical technician feasibility study



Arvind Salvekar
Director, Systems Design

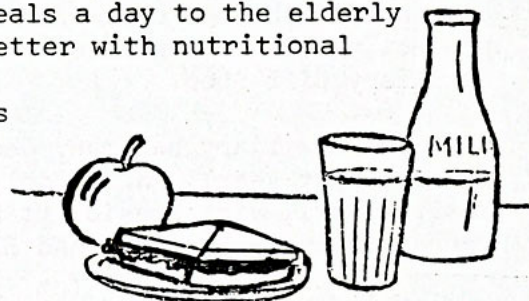


VOLUNTEERS

1976 - 1977

We welcomed a new member to our staff in November in the person of Barbara Andrews. Barb works as evening supervisor with our Junior Volunteers and the Auxiliary. She also coordinates the Home Delivered Meals Program.

This program has grown considerably in the first year of operation in St. Cloud Hospital. We now serve an average of 75 meals a day to the elderly and disabled citizens of our community. A newsletter with nutritional tips and tray favors for holidays was initiated. We work with 690 volunteers from 23 area churches and organizations who deliver meals in foul and fair weather. The commitment of these special volunteers was recognized at a workshop for the HDM volunteer coordinators on June 1.



We have expanded our Student Volunteer program by recruiting and training vocational and college students to work in specific areas for an established time period. Most of these young adults are considering careers in the health field, and the experience that we can provide will continue to promote quality professionals for the health care delivery system. A special "thank you" to Physical Therapy, Extended Care, Library, and Pediatrics for helping to make this experience a reality.

The Auxiliary Ways and Means Chairman, Bernice Landy, capably coordinated the efforts of the St. Cloud Hospital Auxiliary, Medical Auxiliary and the Dental Wives to present the hospital with a check for \$8,000, proceeds from the second annual Hospital Ball. The Americana Ball with a commemorative theme was held on November 13, 1976, at the Germain Hotel.



Auxilians also sponsored a fruit cake sale and a Spring Fashion Festival at Dayton's on March 26, 1977, which netted another \$1,400 for the cardiac care program at St. Cloud Hospital.

National Volunteer Week was April 24 to 30 and was celebrated with much enthusiasm and a full schedule of events. Monday found Mr. Bakke and his Administrative Council members donning volunteer uniforms to learn first hand "What is a volunteer." The administration then presented each volunteer with a warm "thank you" and a daisy corsage. Wednesday was open house in the Volunteer Department. Our hallways became a gallery of pictures that told the volunteer story. There was free coffee, donuts and entertainment by Mary Beth Moline. Thursday we reached out to the community, inviting volunteers from many organizations to share an educational program called "The Second Half Of A Woman's Life" by Dr. R. Lyons. A reception followed. We were promoting a better understanding in our hospital staff and the community of the motivation and spirit of voluntarism.

Following tradition Auxiliary members participated in National Hospital Week activities the week of May 10 including the Blood Pressure Screening Clinic and coffee service to employees on all three shifts.

The annual Auxiliary Awards Luncheon was held at the Sunwood Inn on June 9. Mr. Bakke presented 199 awards to Auxilians and adult volunteers who provided 27,013 hours of service to our patients and staff in 27 departments of SCH. Our numbers have swelled to 253 volunteers.

The Auxiliary took this occasion to present checks in financial support of the programs at their hospital. A \$10,000 check as final payment on a \$34,000 pledge to the purchase of telemetry equipment for the cardiac care program was presented. Another check for \$4,000 was presented to start a fund for their new project yet to be announced. This money was raised through the operation of the Auxiliary Gift Shop.

The Auxiliary has many dedicated workers and leading them are the officers for the past year: Carol Pool, President; Lorraine Weiler, President-Elect; Del Maslonkowski, Vice President; Carol Mackinac, Recording Secretary; Gini Pleticha, Corresponding Secretary; and Elsie Sand, Treasurer.

The Junior Volunteer Program is alive and well. A special newsletter now keeps our members alert to programs, workshops and meetings. We have stressed special training workshops for patient feeding, information desk and Pediatrics. The more we learn the better we can serve.



JUNIOR HOSPITAL VOLUNTEERS

Three fund-raising events including two car washes and a raffle held during June and July earned \$450. We added these funds to our newspaper revenues and our Junior Volunteer dues to finance a trip to Duluth. We toured St. Mary's Hospital and their School of Nursing. It was two days of fun and spirit-building comradeship, which can only make our organization more effective and our service more rewarding.

Capping and Awards ceremonies were held on January 27 and June 7. 110 Juniors were recognized for providing 21,560 hours of service. 51 girls were capped and 5 badges were presented to the new recruits who had completed their two days of training and orientation and more than 50 hours of service. For the first time one of our members reached 1,500 hours of service. Congratulations to Nancy Weyrens from the class of January, 1975. A reception followed the ceremony hosted by the Junior Volunteer officers:

Becky Lund, President,
Peg Theisen, Vice President
Michelle Crusier, Treasurer
Theresa Hormann, Secretary

A new class was accepted in December and June. A Big Sister and Big Brother program was instituted to improve the on-the-job training portion of the orientation to the organization and the hospital setting. Developing responsible young men and women with a respect for their fellowman and a concern for good health is our goal.

Mary Ives

Mary Ives
Director of Volunteer Services

WAGE AND BENEFITS DEPARTMENT

1976 - 1977

The Saint Cloud Hospital in its continuing effort to improve employee benefits identified the need for establishing an employee health service. LuAnn Reif was hired by the Wage and Benefits Department to develop this new program and to function as the hospital's first Health Services Nurse. The Department sees this new benefit helping to meet our main objective of service to the employee.

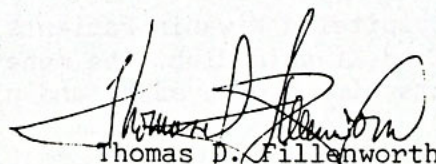
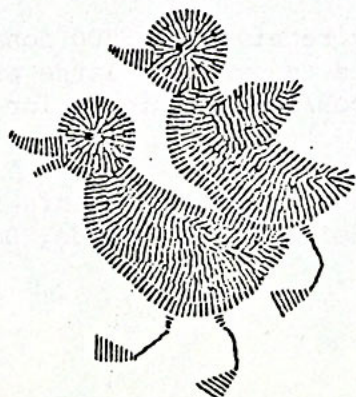
Along with this new addition we have continued our involvement in committees such as Picnic, Blood Donor, Body Mechanics, Safety, Infection Control, Personnel Policies, Personnel Advisory, Beacon Light, Evaluation, Suggestion and Retirement plus outside associations including ASHPA, ASPA, SCAPA and HCPAM. The committee involvement helps us to be aware of the concerns and the welfare of employees. The association involvement gives us background and information so we can keep up with new principles and practices in employer-employee relations.

Also during the past year we assisted in revising and updating of job descriptions and evaluations of the supportive staff in the Dietary Department, Central Service, and a number of other Departments; updated and revised the hospital time off policy, approved absence policy, the retirement benefit policy and the Policies and Procedures Manual. We processed 395 new employees (employee numbers rose by 22 from 1,437 to 1,459), 354 separations and 814 changes in status. Twenty-eight evaluations were completed and approximately 1,800 performance appraisals were completed; and we had an approximate total compensation of \$11,800,000 paid out in wages in fiscal year 1976-77.

The Employee Suggestion System had another successful year with a total number of 101 suggestions between January 1, 1976, to January 1, 1977. Of the 101 suggestions, 15 were adopted and awarded.

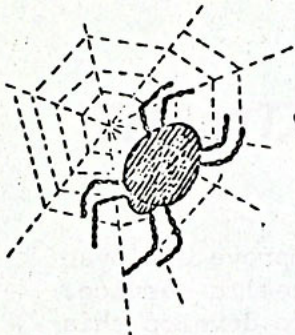
We continued our affiliation with St. Cloud State University School of Business by providing 3 internships in personnel. Our management students gain practical experience while receiving 16 upper division undergraduate credits toward graduation. Many of our interns are already working in responsible management positions in and outside of the health care industry.

People from our department are involved in weekly orientations. This gives us the opportunity to meet the new employees and to explain the hospital policies. Increased involvement in general orientation by this department has broadened the knowledge of the hospital's new employees, helping them understand policies and procedures formerly overlooked.



Thomas D. Fillenworth

Manager, Wage and Benefits Department



HOSPITAL HAPPENINGS

1976 - 1977

JULY

Saint Cloud Hospital Auxiliary held its annual Awards Luncheon at the Germain Hotel. Mary Weyrens, Auxiliary President, presented Gene S. Bakke with \$10,000 to be used toward the purchase of telemetry equipment. Carol Pool was elected the new Auxiliary President.

Sister Virginia Eisenschenk retired as a Saint Cloud Hospital employee after serving 40 years with the Spiritual Care Department.

Four doctors joined the Medical Staff -- Dr. P. VanderStoep, Dr. R. E. Fedor, and Dr. B. R. Rogers, all Radiology Department; and Dr. J. A. Willie, Mental Health Unit.

The Alcohol & Chemical Addiction Unit celebrated its fifth anniversary.

The Minnesota Hospital Association Rate Review Committee approved the hospital's new patient services rate schedule on July 8.

Three representatives from the JCAH reported SCH met or exceeded almost all standards. Dr. David C. Breer stated, "The Saint Cloud Hospital is one of the finest hospitals we have looked at."

Sister Consilia celebrated 48 years of service at SCH and 70 years as a member of the Sisters of the Order of Saint Benedict.

The School of Medical Technology graduated four students: John Segar, Mary Jo Kunz, Ray Rueckert, and Raphael Wiltgen. The School of Anesthesia also graduated four students, the last Nurse Anesthetists to be trained at SCH: Warren Danger, Jerry Chisolm, Judy Meyer, and Dennis Kremer.

AUGUST

The Saint Cloud Hospital Annual Picnic was held on August 28 at Sauk Rapids Municipal Park. 3,140 meals were served despite chilly weather.

The Auxiliary Gift shop began a new service -- "Gifts on Wheels." Patients unable to come to the Gift Shop are able to purchase gifts from the gift cart in their rooms.

SCH Softball Team received the Gold League First Place Award trophy.

The hospital's Kiwanis Patients' Library received a \$600 donation from the St. Cloud Kiwanis Club. The money was used to purchase large print books for patients with poor eyesight and picture book/cassette tapes for pediatric patients.

The School of Radiologic Technology graduated seven students in the SCH chapel: Kathy Dols, Linda Pintok, Melanie Hellman, Zita Eide, Deb Brandt, Denise Parker and Luanne Esping.

AUGUST, continued

A certificate of Accreditation was awarded to the Laboratory Department by the College of American Pathologists (CAP) for accreditation through May, 1978. This is a national organization which sets standards for hospital laboratories and surveys them. Dr. Bozanich, Claude Przybilla and all Laboratory personnel were commended by the surveyors.

SEPTEMBER

Sister Colleen Haggerty returned to SCH after a one-year leave of absence. She was appointed Assistant Administrator for the Planning and Development Division.

Construction began on Saint Benedict's Center. Bids were awarded in July to Gunnary Johnson & Son for construction of physical facility and land development; Alex Newman Company for mechanical construction; Granite City Electric for electrical work; St. Cloud Restaurant and Supply for kitchen equipment; Lagerquist Company for elevator requirements; and Arrow Laundry for laundry equipment. Bishop George Speltz and Sister Henrita Osendorf turned over the first spadeful of ground.

September 7 was the feast of St. Cloud, patron of the hospital. SCH's chapel has one of the few statues of St. Cloud in the United States.

SCH participated in the St. Cloud Diocese Bicentennial Fair on September 12 at Sauk Centre Fairgrounds. The display presented was a pictorial history of the Sisters of the Order of Saint Benedict in St. Cloud's health care and a slide/sound presentation on Saint Benedict's Center.

Fire prevention Week activities were held and were well-attended, according to Mike Seitz. 340 people attended the outdoor demonstrations and learned the operation of fire extinguishers and hoses.

OCTOBER

SCH volunteers participated in the Swine Flu Clinics held in the St. Cloud area.

Respect Life Month was observed with a series of special programs held on four consecutive Thursdays during the month.

SCH's Annual Retirement Dinner was held on October 10, honoring 45 retired employees.

Acute and Skilled Nursing Facilities at SCH were surveyed by the Minnesota Department of Health -- both were licensed for another year.

SCH reached 100% of its United Way Goal with a total contribution of \$21,621.71. Mike Patton, ECG-EEG Department Head, served as this year's chairman.

Gene S. Bakke was named one of two Minnesota Hospital Association delegates to the American Hospital Association for a term beginning January 1, 1977. The delegates formulate policies for about 7,000 member hospitals across the country.



OCTOBER, continued

The hospital corporation extended membership of the Board of Trustees to include the Associate Administrator (Sister Paul Revier) and Chief of Staff (Dr. Koop) as exofficio members.

SCH received word from JCAH that it is again accredited for a two-year period.

NOVEMBER

The Second Annual Auxiliary Ball was held November 13 at the Germain Hotel. Proceeds help pay for telemetry equipment at SCH.

Marylin Anfenson, R.N., School of Nursing Instructor, was named Minnesota Nurses Association March of Dimes Nurse of the Year.

Diabetes screening was held at Crossroads Shopping Center on November 5 and November 12 in cooperation with Central Minnesota Diabetes Association. November was National Diabetes Month.

The Home Delivered Meals Program was moved from the Dietary Department to the Volunteer Department.

The Certificate of Need application for SCH's CAT Scanner was approved by the Minnesota Board of Health on November 10.

State Medical Association Accreditation Committee reviewed types of medical education programs available at SCH.

DECEMBER

Area legislators (Districts 16, 17, 18) met with SCH Board of Trustees, Medical Staff, and Administration on December 16 to discuss legislative concerns of SCH.

Planning Retreat for Administration and Department Heads was held at the Spring Hill Conference Center December 2 and 3 to develop SCH objectives for 1977-78.

Annual Christmas Gift Giving was held December 14 and 15 -- pens and turkeys were given to all SCH employees, medical staff, volunteers, members of the Board of Trustees and SCH Corporation.

Express service for South Bank elevators began by using a key to manually operate elevators needed for patient use.

SCH Employee Handbook of Personnel Policies & Procedures was distributed throughout the hospital. This manual was compiled by the Wage & Benefits Department.

Approval was given at the Board of Trustees meeting for a new policy allowing husbands to accompany their wives into the Delivery Room.

Auxiliary Recognition Luncheon was held. An \$8,000 check was presented to SCH for telemetry equipment.

DECEMBER, continued

5 North and the Mental Health Unit were presented traveling trophies for Christmas decorations.

Radiology Department added ultrasound to its diagnostic capabilities.

St. Cloud was named the United States' fourth healthiest area to reside.

The Automated Individual Deposit System (AIDS) for the payroll was implemented on December 17, 1976.

JANUARY

Mental Health Unit interim satellite unit on 3 NW was opened to provide 10 extra beds for patients nearing discharge.

New PAC officers were elected: Betty Strobel, Chairperson; Paulette Como, Vice-Chairperson; Marie Neumann, Secretary.

Grace Weiss Halenbeck Scholarships were awarded to five students from SCH School of Nursing: Jean Eggert, Joan Fink, Marie Strelow, Pamela Christenson and William Eckberg.

28 Junior Volunteers were honored in a capping ceremony. Requirements are completion of a two-day training session and 50 hours of volunteer work.

Sister Luke Hoschette, OSB, was elected to another term and Vice-Chairperson for the Board of Directors of the Central Minnesota Health Systems Agency.

FEBRUARY

An Image Intensification System was installed in Surgery. This is used in conjunction with conventional fluoroscopy equipment to provide a sharper picture of the surgery area with reduced use of x-rays.

SCH Credit Union Annual Dinner Meeting was held on February 18 at Waite Park American Legion Club.

The Annual Board of Trustees Retreat was held at the Spring Hill Conference Center in Wayzata February 3 and 4.

MHA Day at the Capitol was held on February 16. Board of Trustees, Medical Staff, Administration and Auxiliary members met with legislators to discuss areas of concern regarding health care legislation.

Tenth Annual Board of Trustees - Medical Staff Dinner was held on February 25. This date also marked the 91st anniversary of the Sisters of the Order of Saint Benedict in the health care apostolate.

MARCH

Dale J. Stein, Assistant Administrator, Special Projects Division, announced his resignation to accept a position as Assistant Administrator, St. Alexius Hospital, Bismarck, North Dakota.

Sister Madonna Kuebelbeck, Director of MHU, resigned to accept foreign mission work.

MARCH, continued

A special monitor which records pacemaker patients' heart rate and pacemaker condition over the telephone was installed in EEG-ECG Department.

Hospital Auxiliary hosted its first Fashion Festival on March 26 at Dayton's. The Festival included a Men's and Women's Fashion Show, Champagne Punch Buffet, food preparation and cosmetic demonstration, and special drawing for prizes.

Drs. Robert Cumming and Harold Windschitl were appointed by the State Medical Association Continuing Education Committee to conduct an on-site accreditation survey of the medical education program of Rice Memorial Hospital in Willmar, Minnesota.

New security measures were instituted at SCH for between 9 p.m. and 6 a.m. The only entrance to the Hospital during this period is the Admissions Lobby. The Admissions Clerk admits only employees with proper identification.

"Little Children and Big Poisons" was the special program offered to the community by SCH in conjunction with National Poison Prevention Week, March 20 to 26.

Weight Control Program was sponsored for all SCH employees during National Nutrition Week, March 6 to 12.

Sister Colleen Haggerty, Assistant Administrator, Planning and Development Division, and Claude Przybilla, Laboratory Director, were named co-chairpersons for the 1977 Picnic Committee.

APRIL

National Volunteer Week was recognized at SCH by the administrative staff sharing one hour during the week with the Volunteers in their various duties.

A new automatic door system was installed in the Northwest Lobby to improve hospital accessibility to the physically handicapped.

MAY

SCH School of Nursing held a capping ceremony for freshman students May 1 at St. Paul's Church.

Sister Rita Budig, OSB, was appointed Administrator for Saint Benedict's Center.

National Hospital Week activities were begun with the Annual Recognition Dinner at Sunwood Inn on May 6.

Accreditation for the Radiologic Technology School was received from the American Society of Radiologic Technologists for a two-year period.

73 students from the School of Nursing received their diplomas on May 28 at St. Paul's Church from Bishop George Speltz.

MAY, continued

Infant Care Classes, a new community service sponsored by Continuing Education Department, began. The classes cover a child's first 18 months of development.

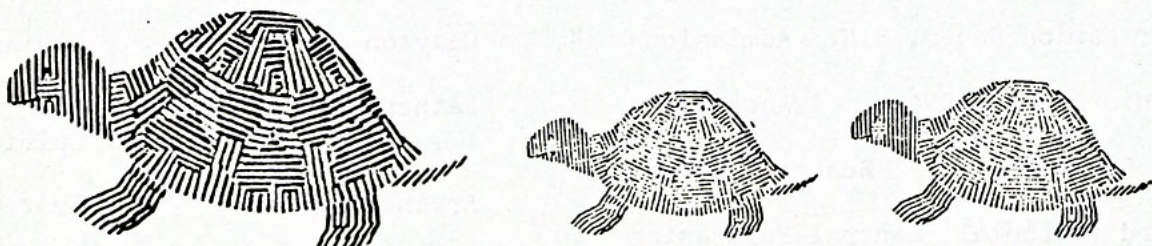
JUNE

The SCH Development Program held its first series of dinners this month for all interested community leaders. Development Dinners will be held throughout the summer months.

All hospital personnel were given the opportunity to attend a special program regarding the "Carter Cap" (fixing of a 9% increase on hospital revenues). Attendees were urged to write our Congressional delegation in Washington, D.C.

SCH Blood Bank received two-year accreditation from the American Association of Blood Banks (AABB).

An increase in the wage/salary program of 7% and an additional holiday (employee's birthday) went into effect with the pay period beginning June 26.



MANAGEMENT STAFF

1976 - 1977

Gene Bakke Executive Vice President

Sister Paul Revier
Associate Administrator, Patient Care
Services and Division of Medical
Support Services

Sister Rita Budig,
Administrator, St. Benedict's Center

Michael Becker, Assistant Adm.
Division of Rehabilitation and Coun-
seling Services

Sister Colleen Haggerty, Asst. Adm.
Division of Planning and Development
Services

Harry J. Knevel, Assistant Adm.
Division of Nursing Services

John Seckinger, Assistant Adm.
Division of Fiscal and General
Services

Dale J. Stein, Assistant Adm.
Division of Shared Services

Sam Wenstrom, Assistant Adm.
Division of Personnel Services

Dr. Robert J. Cumming, Director
Continuing Medical Education

Robert G. Engelhart & Co. Auditors

Kevin Hughes Legal Counsel

DEPARTMENT HEADS

Ronald Spanier Accounting

Paul S. Kurtz Addiction Center

Mrs. Agnes Moeglein
Administrative Office Services

Sister Marion Sauer, R.N. Admissions

Eileen Stafford, CNA Anesthesia

Wayne Lauermann Business Office

Maynard D. Lommel Central Purchasing
and Materials Management

Terence Heinen Data Processing

Mrs. Carolyn Andrews, R.N., Acting Dir.
for Mrs. Sally Grabuski, R.N.
Continuing Education

Jeff Blair, Development and
Community Relations

Mrs. Mary Schoffman, R.D. Dietary

Mike Patton ECG and EEG

Mrs. Betty Turck, R.N.
Emergency-Outpatient

Mrs. Pauline Page Employment

John Seelhammer Engineering Services

Ralph Vasek Housekeeping

Claude Przybilla, M.T. (ASCP) Laboratory

Sister Mary Schneider, R.R.A.
Medical Records

Sister Madonna Kuebelbeck, R.N.
Mental Health

Mrs. Constance Moline, R.N.
Nursing Service

Sister Mary Ellen Machtemes, R.N.
Operating Room

Roger Buchholz Pharmacy

Sister Luke Hoschette Planning

Dr. Richard Enter Psychology

Harold Affeldt, R.T. Radiology

Earl Pederson Rehabilitation

Sister Mary Jude Meyer, R.N.
School of Nursing

Clayton Skretvedt Social Service

Father John McManus, O.M.I.
Spiritual Care

Arvind Salvekar Systems Design

Mrs. Mary Ives Volunteers

Tom Fillenworth Wage and Benefits



